

**TITLE V BLOCK GRANT APPLICATION**  
**FORMS (1-21)**  
**STATE: WA**  
**APPLICATION YEAR: 2007**

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<b>APPLICATION FOR FEDERAL ASSISTANCE</b>		2. DATE SUBMITTED <b>7/15/2006</b>		APPLICANT IDENTIFIER	
1. TYPE OF SUBMISSION:		3. DATE RECEIVED BY STATE		STATE APPLICATION IDENTIFIER	
Application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		Pre-application <input type="checkbox"/> Construction <input checked="" type="checkbox"/> Non-Construction		4. DATE RECEIVED BY FEDERAL AGENCY	
				FEDERAL IDENTIFIER	
5. APPLICANT INFORMATION					
Legal Name: <b>State of Washington, Department of Health</b>  Organizational DUNS: <b>808883128</b>			Organizational Unit: <b>MCH Programs, Community and Family Health</b>		
Address (give city, county, state and zip code) <b>111 Israel Road SE MS 7835 Tumwater, WA 98504</b> County:			Name and telephone number of the person to be contacted on matters involving this application (give area code) Name: <b>Jan Fleming, MCH Office Director</b> Email: <b>Jan.Fleming@doh.wa.gov</b> Tel Number: <b>360.236.3581</b> Fax Number: <b>360.236.2323</b>		
6. EMPLOYER IDENTIFICATION NUMBER (EIN):			7. TYPE OF APPLICANT: (Enter appropriate letter in box) <b>A</b>		
<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; padding: 2px 5px;">9</div> <div style="border: 1px solid black; padding: 2px 5px;">1</div> <div style="border: 1px solid black; padding: 2px 5px;">1</div> <div style="border: 1px solid black; padding: 2px 5px;">4</div> <div style="border: 1px solid black; padding: 2px 5px;">4</div> <div style="border: 1px solid black; padding: 2px 5px;">4</div> <div style="border: 1px solid black; padding: 2px 5px;">6</div> <div style="border: 1px solid black; padding: 2px 5px;">0</div> <div style="border: 1px solid black; padding: 2px 5px;">3</div> </div>			A. State B. County C. Municipality D. Township E. Interstate F. Intermunicipal G. Special District H. Independent School District I. State Controlled Institution of Higher Learning J. Private University K. Indian Tribe L. Individual M. Profit Organization N. Other (Specify)		
8. TYPE OF APPLICATION:			9 NAME OF FEDERAL AGENCY:		
<input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Revision  If Revision, enter appropriate letter(s) in box(es) <input type="checkbox"/> <input type="checkbox"/> <small>A. Increase Award B. Decrease Award C. Increase Duration Decrease Duration Other (specify):</small>			<b>Health Resources and Services Administration, Maternal and Child Health Bureau</b>		
10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:			11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:		
<div style="display: flex; gap: 5px;"> <div style="border: 1px solid black; padding: 2px 5px;">9</div> <div style="border: 1px solid black; padding: 2px 5px;">3</div> <div style="border: 1px solid black; padding: 2px 5px;">9</div> <div style="border: 1px solid black; padding: 2px 5px;">9</div> <div style="border: 1px solid black; padding: 2px 5px;">4</div> </div> TITLE: <b>Maternal and Child Health Services Block Grant</b>			<b>Title V Maternal and Child Health Block Grant</b>		
12. AREAS AFFECTED BY PROJECT (cities, communities, states, etc.):					
<b>Statewide</b>					
13. PROPOSED PROJECT:			14. CONGRESSIONAL DISTRICTS OF:		
Start Date: <b>10/01/2006</b>		Ending Date: <b>09/30/2007</b>	a. Applicant <b>Washington State</b>		b. Project
15. ESTIMATED FUNDING:		16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?			
a. Federal	\$ <u>9,151,423.00</u>	a. YES, THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON DATE:  b. NO <input checked="" type="checkbox"/> PROGRAM IS NOT COVERED BY E.O. 12372 <input type="checkbox"/> OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW			
b. Applicant	\$ <u>0.00</u>				
c. State	\$ <u>7,573,626.00</u>				
d. Local	\$ <u>65,000.00</u>				
e. Other	\$ <u>2,500,000.00</u>				
f. Program Income	\$ <u>0.00</u>				
g. TOTAL	\$ <u>19,290,049.00</u>	17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT			
		<input type="checkbox"/> Yes. If "Yes", attach an explanation <input checked="" type="checkbox"/> No			
18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT. THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY BY THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED.					
a. Typed Name of Authorized Representative <b>Patty Hayes</b>		b. Title <b>Assist. Sec., Community &amp; Family Health</b>		c. Telephone Number <b>360.236.3723</b>	
d. Signature of Authorized Representative				e. Date Signed	

**FORM 2**  
**MCH BUDGET DETAILS FOR FY 2007**

[Secs. 504 (d) and 505(a)(3)(4)]

**STATE: WA**

**1. FEDERAL ALLOCATION**

(Item 15a of the Application Face Sheet [SF 424])

Of the Federal Allocation (1 above), the amount earmarked for:

\$ 9,151,423

A.Preventive and primary care for children:

\$ 5,028,493 ( 54.95 %)

B.Children with special health care needs:

\$ 3,528,546 ( 38.56 %)

(If either A or B is less than 30%, a waiver request must accompany the application)[Sec. 505(a)(3)]

C.Title V administrative costs:

\$ 511,479 ( 5.59 %)

(The above figure cannot be more than 10% )[Sec. 504(d)]

**2. UNOBLIGATED BALANCE** (Item 15b of SF 424)

\$ 0

**3. STATE MCH FUNDS** (Item 15c of the SF 424)

\$ 7,573,626

**4. LOCAL MCH FUNDS** (Item 15d of SF 424)

\$ 65,000

**5. OTHER FUNDS** (Item 15e of SF 424)

\$ 2,500,000

**6. PROGRAM INCOME** (Item 15f of SF 424)

\$ 0

**7. TOTAL STATE MATCH** (Lines 3 through 6)

(Below is your State's FY 1989 Maintenance of Effort Amount)

\$ 7,573,626

\$ 10,138,626

**8. FEDERAL-STATE TITLE V BLOCK GRANT PARTNERSHIP (SUBTOTAL)**

(Total lines 1 through 6. Same as line 15g of SF 424)

\$ 19,290,049

**9. OTHER FEDERAL FUNDS**

(Funds under the control of the person responsible for the administration of the Title V program)

a. SPRANS: \$ 740,315

b. SSDI: \$ 83,333

c. CISS: \$ 0

d. Abstinence Education: \$ 789,677

e. Healthy Start: \$ 0

f. EMSC: \$ 0

g. WIC: \$ 0

h. AIDS: \$ 0

i. CDC: \$ 6,228,729

j. Education: \$ 0

k. Other: \$ 0

Interagency DSHS \$ 1,200,000

Title XIX \$ 1,500,000

**10. OTHER FEDERAL FUNDS** (SUBTOTAL of all Funds under item 9)

\$ 10,542,054

**11. STATE MCH BUDGET TOTAL**

(Partnership subtotal + Other Federal MCH Funds subtotal)

\$ 29,832,103

## FORM NOTES FOR FORM 2

None

### FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** StateMCHFunds  
**Row Name:** State MCH Funds  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
For budgeting this amount will be only Maintenance of Effort. For budget this category will include allocable State match dollars and the Health Service Account funds will provide the balance to get to Maintenance fo Effort. However, in reporting we will use the total H.S.A. expenditures to reflect total effort that it takes.
2. **Section Number:** Main  
**Field Name:** OtherFunds  
**Row Name:** Other Funds  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
This category reflects all budgeted state dollars that are either being used as State match somewhere else (e.g. Oral Health allocations to LHJ's who use the state dollars to pull down match) or MCH State dollars that pull down T-19 match. The Federal Financial Participation (fed match) is reflected below in other Federal Funding.

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506((a))(1-3)]*

**STATE: WA**

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 9,613,745	\$ 9,544,877	\$ 9,556,668	\$ 0	\$ 9,151,423	\$ 0
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 6,500,000	\$ 16,576,995	\$ 7,573,626	\$ 0	\$ 7,573,626	\$ 0
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 89,000	\$ 197,748	\$ 0	\$ 0	\$ 65,000	\$ 0
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 984,626	\$ 2,546,653	\$ 2,500,000	\$ 0	\$ 2,500,000	\$ 0
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 17,187,371	\$ 28,866,273	\$ 19,630,294	\$ 0	\$ 19,290,049	\$ 0
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 9,194,000	\$ 12,897,148	\$ 13,230,895	\$ 0	\$ 10,542,054	\$ 0
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 26,381,371	\$ 41,763,421	\$ 32,861,189	\$ 0	\$ 29,832,103	\$ 0
(STATE MCH BUDGET TOTAL)						

**FORM 3**  
**STATE MCH FUNDING PROFILE**

*[Secs. 505(a) and 506((a))(1-3)]*

**STATE: WA**

	FY 2002		FY 2003		FY 2004	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>1. Federal Allocation</b> <i>(Line1, Form 2)</i>	\$ 9,191,681	\$ 8,041,809	\$ 9,489,652	\$ 10,587,944	\$ 9,364,663	\$ 8,817,546
<b>2. Unobligated Balance</b> <i>(Line2, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>3. State Funds</b> <i>(Line3, Form 2)</i>	\$ 19,143,000	\$ 7,573,626	\$ 14,500,010	\$ 6,584,859	\$ 7,573,626	\$ 13,775,713
<b>4. Local MCH Funds</b> <i>(Line4, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 9,214,603	\$ 0	\$ 93,528
<b>5. Other Funds</b> <i>(Line5, Form 2)</i>	\$ 0	\$ 9,064,942	\$ 0	\$ 0	\$ 0	\$ 2,495,079
<b>6. Program Income</b> <i>(Line6, Form 2)</i>	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
<b>7. Subtotal</b> <i>(Line8, Form 2)</i>	\$ 28,334,681	\$ 24,680,377	\$ 23,989,662	\$ 26,387,406	\$ 16,938,289	\$ 25,181,866
(THE FEDERAL-STATE TITLE BLOCK GRANT PARTNERSHIP)						
<b>8. Other Federal Funds</b> <i>(Line10, Form 2)</i>	\$ 11,027,387	\$ 7,761,304	\$ 8,279,000	\$ 12,633,264	\$ 8,765,000	\$ 11,666,081
<b>9. Total</b> <i>(Line11, Form 2)</i>	\$ 39,362,068	\$ 32,441,681	\$ 32,268,662	\$ 39,020,670	\$ 25,703,289	\$ 36,847,947
(STATE MCH BUDGET TOTAL)						

## FORM NOTES FOR FORM 3

None

### FIELD LEVEL NOTES

- 1. Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(10,076,995). During the budget process for FFY05, OMCH in WA State decided to spread projected expenditures for 1989 Maintenance of Effort across State Funds, Local MCH Funds and Other Funds. Total State Funds would include all matchable General Fund State expenditures as well as HSA funds. In FFY05 almost \$4.0 million GF-S dollars were spent and over \$12 million HSA funds for vaccines were expended. Consequently, reporting total HSA expenditure activity results in overmatch.
- 2. Section Number:** Main  
**Field Name:** StateMCHFundsExpended  
**Row Name:** State Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The (\$6,202,087) variance represents \$9.3 million in Health Service Account vaccine funds for children and \$4.4 million in state funds applied to activities for the Maternal and Child population. Original projections were for achieving the Maintenance of Effort Amount (\$7,573,626) only.
- 3. Section Number:** Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance of \$(108,748) is due to transfer of work and funding from a local agency to DOH as well as carryover expenditures in some Oral ASTDD funding.
- 4. Section Number:** Main  
**Field Name:** LocalMCHFundsExpended  
**Row Name:** Local MCH Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
This amount, (\$93,582) represents unanticipated funding.
- 5. Section Number:** Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(1,562,027). In FFY05, OMCH used this category for HSA projected expenditures as part of the total budget to meet the Maintenance of Effort requirement. In FFY06 OMCH received clarification that the appropriate line to reflect GF-S T-19 expenditures was in this cell, Other Funds. Consequently FFY05 reporting year represents the transition from the old methodology to the new. Therefore, the expenditures in this report category do not count toward the MCH match requirement. Match has been achieved via the expenditures realized in Total State Funds and Local MCH Funds.  
  
One would not achieve a useful analysis of the variance because of the difference in funding sources and uses.
- 6. Section Number:** Main  
**Field Name:** OtherFundsExpended  
**Row Name:** Other Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
This amount, (\$2,495,079) represents a shift in General Fund-State funds to Title XIX in order to leverage more funding for program activities. Additionally, GF-S funds, which had historically been available for MCHBG match were made available at the local level for LHJ's to use to match for T-19 activities related to the MCH population.
- 7. Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(3,593,148) and represents \$3 million in unanticipated funds from CDC for Immunizations as well as \$200,000 additional T-19 Federal Financial Participation and approximately \$300,000 in funding for Delivering Genetics Services.
- 8. Section Number:** Main  
**Field Name:** OtherFedFundsExpended  
**Row Name:** Other Federal Funds  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The (\$2,901,081) variance is due to: The Immunizations program received approximately \$2 million more in funds. The Secondary Disability Prevention Grant increased by approximately \$375,000. Federal Title XIX funding increased by approximately \$600,000 and SPRANS funding increased by over \$400,000.

**FORM 4**

**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: WA**

	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 1,719,000	\$ 1,805,362	\$ 1,560,079	\$ 0	\$ 1,167,581	\$ 0
b. Infants < 1 year old	\$ 3,437,000	\$ 6,219,109	\$ 3,800,143	\$ 0	\$ 4,022,080	\$ 0
c. Children 1 to 22 years old	\$ 7,414,000	\$ 10,632,228	\$ 6,492,167	\$ 0	\$ 7,094,408	\$ 0
d. Children with Special Healthcare Needs	\$ 3,781,000	\$ 6,924,423	\$ 6,229,421	\$ 0	\$ 5,848,937	\$ 0
e. Others	\$ 86,000	\$ 617,742	\$ 304,823	\$ 0	\$ 238,252	\$ 0
f. Administration	\$ 750,371	\$ 2,667,409	\$ 1,243,661	\$ 0	\$ 918,791	\$ 0
g. SUBTOTAL	\$ 17,187,371	\$ 28,866,273	\$ 19,630,294	\$ 0	\$ 19,290,049	\$ 0
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 1,536,000		\$ 1,284,500		\$ 740,315	
b. SSDI	\$ 177,000		\$ 177,000		\$ 83,333	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 832,000		\$ 791,895		\$ 789,677	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 3,940,000		\$ 7,977,500		\$ 6,228,729	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
Interagency DSHS	\$ 0		\$ 1,200,000		\$ 1,200,000	
Title XIX	\$ 1,500,000		\$ 1,800,000		\$ 1,500,000	
Childcare Grant & UT	\$ 1,209,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 9,194,000		\$ 13,230,895		\$ 10,542,054	



**FORM 4**  
**BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)**

[Secs 506(2)(2)(iv)]

**STATE: WA**

	FY 2002		FY 2003		FY 2004	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Federal-State MCH Block Grant Partnership</b>						
a. Pregnant Women	\$ 2,200,000	\$ 2,293,193	\$ 2,300,000	\$ 2,511,685	\$ 2,000,000	\$ 2,001,279
b. Infants < 1 year old	\$ 6,900,000	\$ 5,746,457	\$ 4,930,000	\$ 5,339,559	\$ 2,789,000	\$ 4,874,847
c. Children 1 to 22 years old	\$ 12,300,000	\$ 10,807,089	\$ 10,680,000	\$ 11,838,085	\$ 6,070,000	\$ 8,328,193
d. Children with Special Healthcare Needs	\$ 5,300,000	\$ 4,792,845	\$ 5,115,000	\$ 5,822,065	\$ 5,000,000	\$ 7,991,141
e. Others	\$ 285,000	\$ 176,843	\$ 270,000	\$ 127,024	\$ 200,000	\$ 391,029
f. Administration	\$ 1,349,681	\$ 863,950	\$ 694,662	\$ 748,988	\$ 879,289	\$ 1,595,377
g. SUBTOTAL	\$ 28,334,681	\$ 24,680,377	\$ 23,989,662	\$ 26,387,406	\$ 16,938,289	\$ 25,181,866
<b>II. Other Federal Funds (under the control of the person responsible for administration of the Title V program).</b>						
a. SPRANS	\$ 323,387		\$ 300,000		\$ 530,000	
b. SSDI	\$ 100,000		\$ 100,000		\$ 100,000	
c. CISS	\$ 0		\$ 0		\$ 0	
d. Abstinence Education	\$ 739,000		\$ 739,000		\$ 739,000	
e. Healthy Start	\$ 0		\$ 0		\$ 0	
f. EMSC	\$ 0		\$ 0		\$ 0	
g. WIC	\$ 0		\$ 0		\$ 0	
h. AIDS	\$ 0		\$ 0		\$ 0	
i. CDC	\$ 4,395,000		\$ 4,090,000		\$ 4,946,000	
j. Education	\$ 0		\$ 0		\$ 0	
k. Other						
CLDF (93.575)	\$ 0		\$ 0		\$ 1,100,000	
Domestic Violence (93.926)	\$ 150,000		\$ 150,000		\$ 150,000	
Title XIX (93.778)	\$ 1,200,000		\$ 1,200,000		\$ 1,200,000	
CCDF (93.575)	\$ 0		\$ 1,200,000		\$ 0	
TANF (93.558)	\$ 3,050,000		\$ 500,000		\$ 0	
CCDF (93.575)	\$ 1,070,000		\$ 0		\$ 0	
<b>III. SUBTOTAL</b>	\$ 11,027,387		\$ 8,279,000		\$ 8,765,000	

## FORM NOTES FOR FORM 4

None

### FIELD LEVEL NOTES

- 1. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(2,782,109). Of total expenditures, \$6.2 million was from HSA funds for vaccines. There was a 35% increase in vaccine expenditures and a change in percentage allocation in these categories.
- 2. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_0\_1Expended  
**Row Name:** Infants <1 year old  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The (\$2,085,847) variance is because of the following: In FY02, the Immunization Program lost \$7.4 million in state vaccine funding. Uncertainty regarding availability of H.S.A. (Health Service Account) expenditures to apply to the total MCHBG effort meant budget projections were reduced. Subsequent availability of H.S.A. expenditures accounts for \$2 million.
- 3. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(3,218,228). \$4.7 million of the expenditures were from HSA funds for vaccines. This funding source created the variance. Other sources of expenditures included almost \$2 million in LHJ activities and \$2.5 million in Child and Adolescent Health activities.
- 4. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** Children\_1\_22Expended  
**Row Name:** Children 1 to 22 years old  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The (\$2,258,193) variance is because of the following: In FY 02, the Immunization Program lost \$7.4 million in state vaccine funding. Uncertainty regarding availability of H.S.A. expenditures to apply to the total MCHBG effort meant budget projections were reduced. The subsequent availability of H.S.A. expenditures accounts for the \$2.9 million variance.
- 5. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(3,143,423). This is due to the increase in HSA fund expenditures.
- 6. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** CSHCNExpended  
**Row Name:** CSHCN  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The \$2,991,141 variance is due to refined allocation of expenditures related to Immunizations.
- 7. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(531,742) and includes vaccine wastage, which averages 3% of total HSA expenditures. This was previously allocated across populations served.
- 8. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AllOthersExpended  
**Row Name:** All Others  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The variance of (\$191,029) represents an increase in women of childbearing age, who are not pregnant, seeking and receiving preventive services. This variance also supports the increase in Direct Services and Population Based Services found in Form 5.
- 9. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(1,917,038). This is due to changes in percentage allocations across these categories for HSA vaccine funds. Administration for this source 10% or 1.2 million. Additionally there had been an increase in HSA funds over FFY03, the year used for FFY05 budget.
- 10. Section Number:** I. Federal-State MCH Block Grant Partnership  
**Field Name:** AdminExpended  
**Row Name:** Administration  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
Administrative expenditures increased because Indirect expenditures increased from 3.2% of total expenditures in FY02 (upon which FY04 budget was based) to 4.6% of total actual expenditures. There was additionally a 1.4% increase in expenditures.

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: WA**

TYPE OF SERVICE	FY 2005		FY 2006		FY 2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 1,095,000	\$ 1,148,485	\$ 1,045,526	\$ 0	\$ 743,000	\$ 0
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 3,209,000	\$ 3,918,979	\$ 3,315,031	\$ 0	\$ 2,535,000	\$ 0
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 8,035,000	\$ 16,056,961	\$ 9,431,902	\$ 0	\$ 11,006,000	\$ 0
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 4,848,371	\$ 7,741,848	\$ 5,837,835	\$ 0	\$ 5,006,049	\$ 0
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 17,187,371	\$ 28,866,273	\$ 19,630,294	\$ 0	\$ 19,290,049	\$ 0

**FORM 5**  
**STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES**

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

**STATE: WA**

TYPE OF SERVICE	FY 2002		FY 2003		FY 2004	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED
<b>I. Direct Health Care Services</b> (Basic Health Services and Health Services for CSHCN.)	\$ 2,100,000	\$ 1,146,543	\$ 1,603,000	\$ 1,680,224	\$ 1,100,000	\$ 1,341,207
<b>II. Enabling Services</b> (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$ 3,500,000	\$ 4,311,298	\$ 3,695,000	\$ 4,926,659	\$ 4,308,000	\$ 4,252,543
<b>III. Population-Based Services</b> (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 15,000,000	\$ 11,829,513	\$ 11,820,000	\$ 12,337,208	\$ 3,200,000	\$ 12,099,303
<b>IV. Infrastructure Building Services</b> (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$ 7,734,681	\$ 7,393,023	\$ 6,871,662	\$ 7,443,315	\$ 8,330,289	\$ 7,488,813
<b>V. Federal-State Title V Block Grant Partnership Total</b> (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$ 28,334,681	\$ 24,680,377	\$ 23,989,662	\$ 26,387,406	\$ 16,938,289	\$ 25,181,866

## FORM NOTES FOR FORM 5

None

### FIELD LEVEL NOTES

- 1. Section Number:** Main  
**Field Name:** DirectHCExpended  
**Row Name:** Direct Health Care Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The variance of (\$241,207) is because of the following: There was a 3.4% increase in MCHBG expenditures for Direct Services over FY02 (the actuals used in projecting FY04) for LHJ's. Possibly this is the affects of higher unemployment and increased need for Direct Services in the MCH population. Additionally, the increase in "Others" in Form 4, who would represent women of childbearing age, who are not pregnant, would account for this increase.
- 2. Section Number:** Main  
**Field Name:** EnablingExpended  
**Row Name:** Enabling Services  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(709,979). When one adjusts for the impact of HSA funds on the different services, the difference between budgeted FFY05 and Actual is a change from 47% budgeted to 23% of total actual expenditures. This reveals a shift in overall activity toward more focus on enabling services. It possibly represents program and stakeholder response to tightened and reduced funding.
- 3. Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
In order to understand the expenditure data in relation to MCH activity, it is necessary to control for the H.S.A. expenditures. These represent vaccine expenditures and were characterized as Population-Based and accounted for 54% of total expenditures, creating a large variance. When one adjusts for the H.S.A. funds, which skew the expenditure data, one can see that FFY05 actual expenditures (minus H.S.A. expenditures) accounted for 22%. Compared to projected 28% of budgeted, expenditures appear to be directed toward protecting existing levels of service with a shift toward infrastructure.
- 4. Section Number:** Main  
**Field Name:** PopBasedExpended  
**Row Name:** Population-Based Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The variance of (\$8,899,303) is because of the following: In FY02 the Immunization Program lost \$7.4 million in state vaccine funding. Uncertainty regarding the availability of Health Services Account expenditures to apply to MCHBG total effort meant budget projections for this category were reduced. Additionally, an increase in "Others" in Form 4, non-pregnant women of childbearing age, support this increase.
- 5. Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2005  
**Field Note:**  
The variance is \$(2,893,476). When one includes the HSA expenditures in the total for Form 5, it appears as if only 26% went to Infrastructure. When the expenditures are adjusted for HSA, 47% of expenditures went to Infrastructure Building Services. It is possible that this represents LHJ and external stakeholder efforts to preserve Infrastructure in the face of decreased funding availability.
- 6. Section Number:** Main  
**Field Name:** InfrastrBuildExpended  
**Row Name:** Infrastructure Building Services  
**Column Name:** Expended  
**Year:** 2004  
**Field Note:**  
The variance of \$841,476 is due to the following: In FY03 the Child Death Review program was eliminated, decreasing expenditures for this category by \$450,000. In FY02 a downturned economy and a slow recovery lead to projections of expenditure shifts to protect infrastructure. Comparison of actual expenditures for FY02 (\$7,393,023) reveal that the expenditure shift was not as significant as originally predicted.

FORM 6						
NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED						
Sect. 506(a)(2)(B)(iii)						
STATE: WA						
Total Births by Occurrence: <u>78,118</u>				Reporting Year: 2004		
Type of Screening Tests	(A) Receiving at least one Screen (1)		(B) No. of Presumptive Positive Screens	(C) No. Confirmed Cases (2)	(D) Needing Treatment that Received Treatment (3)	
	No.	%			No.	%
Phenylketonuria	<u>77,774</u>	<u>99.6</u>	<u>7</u>	<u>6</u>	<u>6</u>	<u>100</u>
Congenital Hypothyroidism	<u>77,774</u>	<u>99.6</u>	<u>107</u>	<u>56</u>	<u>56</u>	<u>100</u>
Galactosemia	<u>77,774</u>	<u>99.6</u>	<u>27</u>	<u>2</u>	<u>2</u>	<u>100</u>
Sickle Cell Disease	<u>77,774</u>	<u>99.6</u>	<u>10</u>	<u>9</u>	<u>9</u>	<u>100</u>
<b>Other Screening (Specify)</b>						
Biotinidase Deficiency	<u>77,774</u>	<u>99.6</u>	<u>3</u>	<u>2</u>	<u>2</u>	<u>100</u>
Homocystinuria	<u>77,774</u>	<u>99.6</u>	<u>0</u>	<u>0</u>	<u>0</u>	
Congenital Adrenal Hyperplasia (CAH)	<u>77,774</u>	<u>99.6</u>	<u>71</u>	<u>7</u>	<u>7</u>	<u>100</u>
Maple Syrup Urine Disease (MSUD)	<u>77,774</u>	<u>99.6</u>	<u>0</u>	<u>0</u>	<u>0</u>	
Medium Chain AcylCo-A Dehydrogenase (MCAD)	<u>45,368</u>	<u>58.1</u>	<u>6</u>	<u>3</u>	<u>2</u>	<u>66.7</u>
<b>Screening Programs for Older Children &amp; Women (Specify Tests by name)</b>						
(1) Use occurrent births as denominator.						
(2) Report only those from resident births.						
(3) Use number of confirmed cases as denominator.						

## FORM NOTES FOR FORM 6

These data come from the Department of Health Office of Newborn Screening database (updated monthly). The numerator is the number of live born infants born in Washington that were reported as screened by the Office of Newborn Screening. The denominator is the number of live births occurring in Washington. Infants born on U.S. Military Installations are excluded. For 2004, the total excludes are: 75 parent refusals, 149 infants expired prior to testing, 80 infants transferred to an Oregon hospital and tested there, and 40 unknown. The state currently screens for PKU, congenital hypothyroidism, galactosemia, sickle cell disease, congenital adrenal hyperplasia, MCAD deficiency, biotinidase, maple syrup urine disease (MSUD), and homocystinuria. In 2004, there were no infants with a positive result for MSUD or homocystinuria.

Numerator==77,774  
Den== 78,118  
Total screened = 99.6 %

### FIELD LEVEL NOTES

**1. Section Number:** Main

**Field Name:** Phenylketonuria\_Presumptive

**Row Name:** Phenylketonuria

**Column Name:** Presumptive positive screens

**Year:** 2007

**Field Note:**

When newborns are screened for the following conditions, they can show a positive result, however some of these may be false positives due to a variety of factors. The confirmed cases are those who are true positive results and have been verified as accurate. For that reason, there were 10 initial positive results for sick cell disease, and all of them were confirmed as being positive. For PKU, there were some false negatives, but upon verification 8 true confirmed cases were found.

**2. Section Number:** Main

**Field Name:** SickleCellDisease\_Presumptive

**Row Name:** SickleCellDisease

**Column Name:** Presumptive positive screens

**Year:** 2007

**Field Note:**

When newborns are screened for the following conditions, they can show a positive result, however some of these may be false positives due to a variety of factors. The confirmed cases are those who are true positive results and have been verified as accurate. For that reason, there were 10 initial positive results for sick cell disease, and all of them were confirmed as being positive. For PKU, there were some false negatives, but upon verification 8 true confirmed cases were found.

**3. Section Number:** Main

**Field Name:** Phenylketonuria\_Confirmed

**Row Name:** Phenylketonuria

**Column Name:** Confirmed Cases

**Year:** 2007

**Field Note:**

When newborns are screened for the following conditions, they can show a positive result, however some of these may be false positives due to a variety of factors. The confirmed cases are those who are true positive results and have been verified as accurate. For PKU, there were some false negatives, but upon verification 8 true confirmed cases were found.

Further, there are some mild forms of PKU that do not require treatment consisting of the special metabolic formula. These patients can keep their blood levels in a safe range by merely maintaining a low protein diet (no meat and limited dairy products).

**4. Section Number:** Main

**Field Name:** SickleCellDisease\_Confirmed

**Row Name:** SickleCellDisease

**Column Name:** Confirmed Cases

**Year:** 2007

**Field Note:**

When newborns are screened for the following conditions, they can show a positive result, however some of these may be false positives due to a variety of factors. The confirmed cases are those who are true positive results and have been verified as accurate. For that reason, there were 10 initial positive results for sick cell disease, and all of them were confirmed as being positive.

As far as sickle cell disease, not all forms (i.e. sickle E disease) require the preventive treatment of penicillin prophylaxis.

**FORM 7**  
**NUMBER OF INDIVIDUALS SERVED (UNDUPLICATED) UNDER TITLE V**  
**(BY CLASS OF INDIVIDUALS AND PERCENT OF HEALTH COVERAGE)**

*[Sec. 506(a)(2)(A)(i-ii)]*

**STATE: WA**

**Reporting Year: 2005**

Types of Individuals Served	TITLE V	PRIMARY SOURCES OF COVERAGE				
	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %
Pregnant Women	19,981	88.7		3.0	8.3	
Infants < 1 year old	80,433	45.9		48.5	5.6	
Children 1 to 22 years old	421,857	38.6	0.7	51.5	9.2	
Children with Special Healthcare Needs	9,393	81.4		12.2	6.4	
Others	4,911	44.7		19.7	35.6	
<b>TOTAL</b>	<b>536,575</b>					



**FORM NOTES FOR FORM 7**

Total Served: Total served is the unduplicated total number of individuals receiving a direct service from the Title V program by class of individual. The number of pregnant women served, children with special health care needs served, and others served comes from reporting of direct services by local health jurisdictions across the state. The number of infants <1 year of age served are the total deliveries in Washington State in 2004. Deliveries are not live births, but include fetal deaths and approximately 500 infants who are born out of Washington State. The number of children ages 1 to 22 served includes those children ages 1 to 6 that are sent CHILD Profile Health promotion materials through the mail. In order to eliminate the possibility of duplication with the number of children served by LHJs in a variety of service and referral programs that include health promotion, only 50% of the children reported served by LHJs are added to the number of children receiving CHILD Profile packets. In 1998, CHILD Profile Health Promotion expansion was initiated, and on January 1, 2002 DOH assumed responsibility for the entire CHILD Profile system. In FFY 2005, Health Promotion materials were sent to parents 86% children aged birth to six years. On June 30, 2004, CHILD Profile Health Promotion completed statewide expansion with 86% of parents of children aged 0-6 years being sent the materials.

Primary Source of Coverage: These data were obtained through LHJs; Medicaid Management Information System (MMIS) eligibility files, Medical Assistance Administration (MAA), Washington State Department of Social and Health Services; First Steps Database, Washington Department of Social and Health Services; and the Washington State Office of Financial Management.

**FIELD LEVEL NOTES**

None

**FORM 8**  
**DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE**  
**XIX**  
**(BY RACE AND ETHNICITY)**  
[SEC. 506(A)(2)(C-D)]  
**STATE: WA**

Reporting Year: 2004

**I. UNDUPLICATED COUNT BY RACE**

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	80,433	54,535	2,782	1,522	6,169	676	3,333	11,416
Title V Served	19,947	13,525	689	377	1,530	168	827	2,831
Eligible for Title XIX	36,915	21,440	1,907	1,180	1,906	442	1,912	8,128
<b>INFANTS</b>								
Total Infants in State	81,663	55,402	2,839	1,542	6,238	684	3,382	11,576
Title V Served	77,743	52,743	2,703	1,468	5,938	651	3,220	11,020
Eligible for Title XIX	37,362	21,698	1,944	1,195	1,922	444	1,941	8,218

**II. UNDUPLICATED COUNT BY ETHNICITY**

				<b>HISPANIC OR LATINO (Sub-categories by country or area of origin)</b>				
	(A) Total NOT Hispanic or Latino	(B) Total Hispanic or Latino	(C) Ethnicity Not Reported	(B.1) Mexican	(B.2) Cuban	(B.3) Puerto Rican	(B.4) Central and South American	(B.5) Other and Unknown
<b>DELIVERIES</b>								
Total Deliveries in State	62,966	14,059	3,408	11,638	64	336		2,138
Title V Served	15,642	3,486	845	2,886	16	83		530
Eligible for Title XIX	25,001	10,626	1,288	9,137	32	196		1,329
<b>INFANTS</b>								
Total Infants in State	63,953	14,220	3,490	11,771	65	342		2,161
Title V Served	60,907	13,537	3,322	11,206	62	326		2,057
Eligible for Title XIX	25,316	10,738	1,308	9,233	33	199		1,342

## FORM NOTES FOR FORM 8

Deliveries and Infants served by Title V and entitled to benefits under Title XIX.

Total Deliveries in State:

The population-based total of all resident deliveries occurring in Washington State for 2004 was obtained from the First Steps Database (FSDB), Washington State Department of Social and Health Services, 3/29/06, using 2004 Washington State Birth Certificate Files. The FSDB number of deliveries is unduplicated by woman (in the case of multiple births) and includes fetal deaths.

Title V Served: No contractors are using Maternal and Child Health funds for direct prenatal care, delivery and postpartum services. This number represents the total number of pregnant women served by all LHJs in 2004, and was reported in Form 7 of the 2006 Maternal and Child Health Block Grant Application.

Eligible for XIX: Those eligible for Title XIX were determined by the number of Medicaid deliveries, by race and ethnicity, reported in the First Steps Database, Washington State of Social and Health Services, 3/29/06. These data reflect Washington state residents.

Total Infants in State:

The population-based total of all infants (<1 year old) by race in Washington State for 2004 was derived from the total number of births by residence in the state by maternal race from the Washington State Birth Certificate Files. The number of infants is computed by counting all live born infants (fetal deaths are excluded).

Title V Served: The total number of infants served under Title V is the number of infants receiving newborn screening in 2004, as reported on Form 6. These data were obtained from the Newborn Screening Program, Washington State Department of Health Public Health Laboratories.

Eligible for XIX: Those eligible for Title XIX were determined by the number of births reported by Medicaid status, maternal race, and maternal ethnicity in the First Steps Database, Washington State of Social and Health Services, 3/29/06.

## FIELD LEVEL NOTES

**1. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTotal\_TotalHispanic

**Row Name:** Total Deliveries in State

**Column Name:** Total Hispanic or Latino

**Year:** 2007

**Field Note:**

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so the subtotals are not mutually exclusive.

**2. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleV\_TotalHispanic

**Row Name:** Title V Served

**Column Name:** Total Hispanic or Latino

**Year:** 2007

**Field Note:**

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so the subtotals are not mutually exclusive.

**3. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** DeliveriesTitleXIX\_TotalHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Hispanic or Latino

**Year:** 2007

**Field Note:**

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so the subtotals are not mutually exclusive.

**4. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTotal\_TotalHispanic

**Row Name:** Total Infants in State

**Column Name:** Total Hispanic or Latino

**Year:** 2007

**Field Note:**

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so the subtotals are not mutually exclusive.

**5. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleV\_TotalHispanic

**Row Name:** Title V Served

**Column Name:** Total Hispanic or Latino

**Year:** 2007

**Field Note:**

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so the subtotals are not mutually exclusive.

**6. Section Number:** II. Unduplicated Count by Ethnicity

**Field Name:** InfantsTitleXIX\_TotalHispanic

**Row Name:** Eligible for Title XIX

**Column Name:** Total Hispanic or Latino

**Year:** 2007

**Field Note:**

Total Hispanic/Latino may not be equal to the sub-categories. Some of the birth certificate records have multiple ethnicities indicated, so the subtotals are not mutually exclusive.

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: WA**

	FY 2007	FY 2006	FY 2005	FY 2004	FY 2003
1. State MCH Toll-Free "Hotline" Telephone Number	800-322-2588	800-322-2588	800-322-2588	800-322-2588	(800) 322-2588
2. State MCH Toll-Free "Hotline" Name	Family Health	Healthy Mothers Healthy Babies	Healthy Mothers Healthy Babies	Healthy Mothers Healthy Babies	Healthy Mothers Healthy Babies
3. Name of Contact Person for State MCH "Hotline"	Candi Wines	Vicki M. Bouvier	Vicki M. Bouvier	Nancy Welton	Nancy Welton (360) 236-
4. Contact Person's Telephone Number	(360) 236-3459	(360) 236-3459	(360) 236-3459	(360) 236-3524	Tom Rogers (360) 236
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	33,995	32,773	54,593

**FORM 9**  
**STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL)**  
[SECS. 505(A)(E) AND 509(A)(8)]  
**STATE: WA**

	FY 2007	FY 2006	FY 2005	FY 2004	FY 2003
1. State MCH Toll-Free "Hotline" Telephone Number					
2. State MCH Toll-Free "Hotline" Name					
3. Name of Contact Person for State MCH "Hotline"					
4. Contact Person's Telephone Number					
5. Number of calls received on the State MCH "Hotline" this reporting period	0	0	0	0	0

FORM NOTES FOR FORM 9

None

FIELD LEVEL NOTES

1. **Section Number:** Main  
**Field Name:** hname\_2  
**Row Name:** State MCH toll-free hotline name  
**Column Name:** FY  
**Year:** 2007  
**Field Note:**  
Healthy Mothers, Healthy Babies (HMHB) changed its name to WithinReach and continues to operate numerous hotlines. The maternal and child health hotline is now called "Family Health."

**FORM 10**  
**TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT**  
**STATE PROFILE FOR FY 2007**  
*[SEC. 506(A)(1)]*  
**STATE: WA**

1. State MCH Administration:  
(max 2500 characters)

The Department of Health is the state agency that administers the MCH Block Grant in the state of Washington. The Office of Maternal and Child Health is located in the Division of Community and Family Health under the direction of the Assistant Secretary, Patty Hayes. OMCH is divided into the following sections: Maternal and Infant Health, Child and Adolescent Health, Children with Special Health Care Needs, Genetic Services, Immunization Program/CHILD Profile, and Assessment. These sections are focused primarily on infrastructure-building, with the majority of direct health care, enabling, and population-based Title V services contracted and provided through 35 local health jurisdictions and other agencies throughout the state.

Block Grant Funds

2. Federal Allocation (Line 1, Form 2)	\$ 9,151,423
3. Unobligated balance (Line 2, Form 2)	\$ 0
4. State Funds (Line 3, Form 2)	\$ 7,573,626
5. Local MCH Funds (Line 4, Form 2)	\$ 65,000
6. Other Funds (Line 5, Form 2)	\$ 2,500,000
7. Program Income (Line 6, Form 2)	\$ 0
<b>8. Total Federal-State Partnership (Line 8, Form 2)</b>	<b>\$ 19,290,049</b>

9. Most significant providers receiving MCH funds:

Local health jurisdictions
University of Washington
Neurodevelopmental Centers
Children's Hospital and Regional Medical Center

10. Individuals served by the Title V Program (Col. A, Form 7)

a. Pregnant Women	19,981
b. Infants < 1 year old	80,433
c. Children 1 to 22 years old	421,857
d. CSHCN	9,393
e. Others	4,911

11. Statewide Initiatives and Partnerships:

a. Direct Medical Care and Enabling Services:  
(max 2500 characters)

Determine family eligibility for financial and support services and coordinate through state and county CSHCN programs and medical homes. Purchase and distribute medically necessary formulas and low-protein foods for individuals with PKU and other metabolic disorders. Contract with LHJs for activities that increase awareness of, and access to, medical homes within their communities. Provide limited diagnostic and treatment funds to fill gaps in services for children with special needs, including those for undocumented children with special needs. Contract with Neurodevelopmental Centers (NDCs) to support community-based collaborations among NDCs, local health agencies, and other partners. Send parents age-specific reminders of the need for well-child checkups and immunizations via CHILD Profile Health Promotion. Select, fund, and evaluate three to five sites for the teen pregnancy prevention project that incorporates community-based interventions with a family planning component. Develop, pilot, and evaluate abstinence education-based media literacy curriculum for youth at five sites. Offer oral health funding to all local health jurisdictions through MCH consolidated contracts, which may include support for, and referral to, sealant programs. Provide breastfeeding support and education to low income women on Medicaid through Maternity Support Services. Make Maternity Support Service/Infant Case Management provider referrals for newborn and pediatric care. Refer eligible families to Medicaid services through local health jurisdictions. Increase smoking cessation referrals during pregnancy through the Maternity Support Services Tobacco Initiative. Provide Motivational Interview training for health care professionals to improve client compliance with basic healthy behaviors throughout pregnancy. Fund Regional Perinatal Centers to provide professional education, consultation, and transportation of high-risk pregnant women and neonates. Promote Medicaid Take Charge Program to increase family planning services for men and women. Send genetic brochure through WithinReach prenatal mailings.

b. Population-Based Services:  
(max 2500 characters)

Develop and implement policy based on the outcome evaluation of WISE pilots regarding community care coordination. Contract with Community/Migrant Health Centers to enhance use of the Washington State Immunization registry in clinic practice. Collect data to inform the development of statewide public awareness campaign regarding abstinence education (Ab-Ed) targeting youth ages 10 to 14 years and parents. Implement and monitor the Ab-Ed-based statewide public awareness campaign targeting youth and parents. Provide parents of children 0 to 6 years with car seat and booster seat information and resources via CHILD Profile Health Promotion Materials. Promote the use of car seats, booster seats, and other motor vehicle safety activities by several local health jurisdictions. Contract with CHRMC to promote universal newborn hearing screening in birthing hospitals. Provide education and consultation to health care professionals in management of very low birthweight infants and high-risk pregnancies through Regional Perinatal Centers. Collaborate with March of Dimes on a prematurity prevention campaign. Continue to collaborate with the DOH, Office of Injury Prevention to impellent and evaluate the Youth Suicide Prevention program. Include emergency contraception information in the medical meeting display to increase provider awareness and promote pre-exposure dissemination. Provide messages about birth spacing and family planning in the CHILD Profile parent education letter. Work with the Health Recovery and Services Administration to implement the Smoking Cessation benefit for pregnant women. Develop and disseminate the provider reference card. Send informational mailing to obstetric providers about prevention or testing for birth defects or genetic disease. Assist in the distribution of materials related to domestic violence including the safety cards produced by the state Department of Social and Health Services. Disseminate Social and Emotional Development messages to parents of children 0 to 6 years of age through the CHILD Profile Health Promotion System.

c. Infrastructure Building Services:  
(max 2500 characters)

Collect long-term outcome data to evaluate the benefits of various components of treatment, compliance, and intervention. Develop a data system linking newborn screening

records with hearing screening. Contract with the Center for Children with Special Needs and Children's Hospital and Regional Medical Center (CHRM) to provide ongoing analysis of available data on children with special needs. Ensure family representation in policy development through contracts with local health jurisdictions (LHJs) and other contractors and through ongoing dialogue at CSHCN Communication Network meetings. Support the Medical Home Learning Network and the Medical Home grant through staff involvement and leadership to increase awareness of medical homes statewide. Maintain the network of CSHCN Coordinators and interagency collaborations to provide forums for system improvement that include families as partners; and provide learning opportunities about local, state, and national systems for children with special needs. Contract with LHJs and others to complete immunization AFIX visits to enrolled private provider sites. Partner with LHJs to conduct population-based surveys to assess immunization levels of two year old children. Contract with federally-recognized tribes to help build capacity to assess immunization coverage rates. Collect, analyze, and disseminate results of the Smile Survey, which looks at the oral health status of children in the state through a randomized sampling process. Review Medicaid and ABCD data on provision of sealants through annual consultation with DSHS, HRSA. Review all unexpected deaths (including motor vehicle crash deaths) of children 0 to 18 by local Child Death Review teams to identify community prevention strategies. Collaborate with the injury prevention programs outside MCH such as Safe Kids State Coalition and DOH cross-division Injury Prevention Workgroup. Recommend lactation support at all hospitals with delivery services through a Perinatal Level of Care document. Collect PRAMS data that measures breastfeeding rates, trends, and disparities between groups. Develop an EHDDI tracking and surveillance system. Conduct annual newborn hearing screening survey with birthing hospitals across the state.

12. The primary Title V Program contact person:

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**FORM NOTES FOR FORM 10**

None

**FIELD LEVEL NOTES**

None



**FORM 11**  
**TRACKING PERFORMANCE MEASURES**  
[SECS 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)]  
**STATE: WA**

**Form Level Notes for Form 11**

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses. The Newborn Screening program seeks the maintenance of 100 percent of positively screened newborns receiving timely follow up to definitive diagnosis and clinical management for mandated condition(s).

**PERFORMANCE MEASURE # 01**

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

Annual Objective and Performance Data					
	2001	2002	2003	2004	2005
Annual Performance Objective	99.5	99.6	99.7	99.7	95
Annual Indicator	93.6	93.9	89.3	100.0	100.0
Numerator	44	46	50	88	77
Denominator	47	49	56	88	77
Is the Data Provisional or Final?				Final	Provisional

Annual Objective and Performance Data					
	2006	2007	2008	2009	2010
Annual Performance Objective	100	100	100	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

**1. Section Number:** Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

PERFORMANCE OBJECTIVES: The Newborn Screening program expects to maintain 100% of screen positive newborns receiving timely follow up. Therefore, for the period of 2006-2010, the future objectives will be 100%.

The percent of newborns in the State with at least one screening for each of PKU, hypothyroidism, hemoglobinopathies, and congenital adrenal hyperplasia with appropriate referral.

These data come from Form 6. The numerator is the number of live born infants born in Washington that were reported by the Office of Newborn Screening as screened and were a confirmed case that received treatment. The denominator is the number that were screened and were a confirmed case. Only preliminary data exists for the year 2005. The state currently screens for PKU, congenital hypothyroidism, galactosemia, sickle cell disease, congenital adrenal hyperplasia, MCAD deficiency, biotinidase, maple syrup urine disease (MSUD), and homocystinuria. See Form 6 for details on conditions.

**2. Section Number:** Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The percent of newborns in the State with at least one screening for each of PKU, hypothyroidism, hemoglobinopathies, and congenital adrenal hyperplasia with appropriate referral.

These data come from Form 6. The numerator is the number of live born infants born in Washington that were reported by the Office of Newborn Screening as screened and were a confirmed case that received treatment. The denominator is the number that were screened and were a confirmed case. In 2004, 99.6% of newborns received a newborn screening. The state currently screens for PKU, congenital hypothyroidism, galactosemia, sickle cell disease, congenital adrenal hyperplasia, MCAD deficiency, biotinidase, maple syrup urine disease (MSUD), and homocystinuria. See Form 6 for details on conditions.

**3. Section Number:** Performance Measure #1

**Field Name:** PM01

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

The percent of newborns in the State with at least one screening for each of PKU, hypothyroidism, hemoglobinopathies, and congenital adrenal hyperplasia with appropriate referral.

These data come from Form 6. The numerator is the number of live born infants born in Washington that were reported by the Office of Newborn Screening as screened and were a confirmed case that received treatment. The denominator is the number that were screened and were a confirmed case. In 2003, 98.7% of newborns received a newborn screening. The state currently screens for adrenal hyperplasia, PKU, hypothyroidism, congenital adrenal hyperplasia, and hemoglobinopathies. Washington began screening for galactosemia in FFY 2003. See Form 6 for details on conditions.

**PERFORMANCE MEASURE # 02**

The percent of children with special health care needs age 0 to 18 years whose families partner in decision making at all levels and are satisfied with the services they receive. (CHSCN survey)

Annual Objective and Performance Data					
	2001	2002	2003	2004	2005
Annual Performance Objective			54.9	54.9	56
Annual Indicator		54.9	54.9	54.9	54.9
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	<u>56.5</u>	<u>57</u>	<u>57.5</u>	<u>58</u>	<u>58.5</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The National Survey of CHSCN was only conducted once and new data won't be available until 2007, thus preventing the ability to conduct trend analyses. Trends will be modified as more data becomes available. Therefore, current targets are based on a variety of environmental factors and program decisions about how these factors could influence future targets. An annual increase of 0.5% was chosen through 2010.

The source is the CHSCN Survey from the MCHB. No new data were available

**2. Section Number:** Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #2**Field Name:** PM02**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available.

**PERFORMANCE MEASURE # 03**

The percent of children with special health care needs age 0 to 18 who receive coordinated, ongoing, comprehensive care within a medical home. (CSHCN Survey)

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective			53.6	53.6	53
Annual Indicator		53.6	53.6	53.6	53.6
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	53	53	53	54	54.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The National Survey of CSHCN was only conducted once and new data won't be available until 2007, thus preventing the ability to conduct trend analyses. Trends will be modified as more data becomes available. Therefore, current targets are based on a variety of environmental factors and program decisions about how these factors could influence future targets. An annual increase of 0.5% was chosen through 2010.

The source is the CHSCN Survey from the MCHB. No new data were available.

**2. Section Number:** Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #3**Field Name:** PM03**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available.

**PERFORMANCE MEASURE # 04**

The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for the services they need. (CSHCN Survey)

Annual Objective and Performance Data					
	2001	2002	2003	2004	2005
Annual Performance Objective			64.4	64.4	63
Annual Indicator		64.4	64.4	64.4	64.4
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

Annual Objective and Performance Data					
	2006	2007	2008	2009	2010
Annual Performance Objective	64.5	66	67.5	69	70.5
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The National Survey of CSHCN was only conducted once and new data won't be available until 2007, thus preventing the ability to conduct trend analyses. Trends will be modified as more data becomes available. Therefore, current targets are based on a variety of environmental factors, policy changes in other state agencies, and program decisions about how these factors could influence future targets. An annual increase of 1.5% was chosen through 2010.

The source is the CHSCN Survey from the MCHB. No new data were available.

**2. Section Number:** Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #4**Field Name:** PM04**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data are available.

**PERFORMANCE MEASURE # 05**

Percent of children with special health care needs age 0 to 18 whose families report the community-based service systems are organized so they can use them easily. (CSHCN Survey)

Annual Objective and Performance Data					
	2001	2002	2003	2004	2005
Annual Performance Objective			74.1	74.1	74.6
Annual Indicator		74.1	74.1	74.1	74.1
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	<u>75</u>	<u>76</u>	<u>77</u>	<u>78</u>	<u>79</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The National Survey of CSHCN was only conducted once and new data won't be available until 2007, thus preventing the ability to conduct trend analyses. Trends will be modified as more data becomes available. Therefore, current targets are based on a variety of environmental factors and program decisions about how these factors could influence future targets. An annual increase of 1% was chosen through 2010.

The source is the CHSCN Survey from the MCHB. No new data were available.

**2. Section Number:** Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #5**Field Name:** PM05**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available.

**PERFORMANCE MEASURE # 06**

The percentage of youth with special health care needs who received the services necessary to make transitions to all aspects of adult life, including adult health care, work, and independence.

Annual Objective and Performance Data					
	2001	2002	2003	2004	2005
Annual Performance Objective			5.8	5.8	8.3
Annual Indicator		5.8	5.8	5.8	5.8
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	<u>9.8</u>	<u>11.3</u>	<u>12.8</u>	<u>14.3</u>	<u>15.8</u>
Annual Indicator	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
Numerator					
Denominator					

**Field Level Notes****1. Section Number:** Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The National Survey of CHSCN was only conducted once and new data won't be available until 2007, thus preventing the ability to conduct trend analyses. Trends will be modified as more data becomes available. Therefore, current targets are based on a variety of environmental factors and program decisions about how these factors could influence future targets. An annual increase of 1.5% was chosen through 2010.

The source is the CHSCN Survey from the MCHB. No new data were available.

**2. Section Number:** Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #6**Field Name:** PM06**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source is the CHSCN Survey from the MCHB. No new data were available.

**PERFORMANCE MEASURE # 07**

Percent of 19 to 35 month olds who have received full schedule of age appropriate immunizations against Measles, Mumps, Rubella, Polio, Diphtheria, Tetanus, Pertussis, Haemophilus Influenza, and Hepatitis B.

<b>Annual Objective and Performance Data</b>					
	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
<b>Annual Performance Objective</b>	<u>82.5</u>	<u>83</u>	<u>75</u>	<u>76.4</u>	<u>77</u>
<b>Annual Indicator</b>	<u>71.2</u>	<u>69.2</u>	<u>75.3</u>	<u>77.7</u>	<u>77.8</u>
<b>Numerator</b>	<u>56,890</u>	<u>54,681</u>	<u>61,045</u>	<u>61,962</u>	<u>62,309</u>
<b>Denominator</b>	<u>79,903</u>	<u>79,019</u>	<u>81,069</u>	<u>79,745</u>	<u>80,089</u>
<b>Is the Data Provisional or Final?</b>				Final	Final

<b>Annual Objective and Performance Data</b>					
	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
<b>Annual Performance Objective</b>	<u>78</u>	<u>79</u>	<u>79</u>	<u>80</u>	<u>80</u>
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes****1. Section Number:** Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. Recent WA rates were as follows: 2003 = 75.3%, 2004 = 77.7%, and 2005 = 77.8%. The 75th percentile state was at 83.9%. Therefore, a one percent increase every two years was chosen.

Numerator data came from the National Immunization Survey 2005, Centers for Disease Control and Prevention (CDC). This estimate is based on the provider-verified responses for children who live in households with telephones. Statistical methods are used to adjust for children whose parents refuse to participate, those who live in households without telephones, or those whose immunization histories cannot be verified through their providers. The numerator is the estimated number of children with completed immunizations. Denominator data came from the Washington State Office of Financial Management.

**2. Section Number:** Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2004**Field Note:**

Numerator data came from the National Immunization Survey 2004, Centers for Disease Control and Prevention (CDC). This estimate is based on the provider-verified responses for children who live in households with telephones. Statistical methods are used to adjust for children whose parents refuse to participate, those who live in households without telephones, or those whose immunization histories cannot be verified through their providers. The numerator is the estimated number of children with completed immunizations. Denominator data came from the Washington State Office of Financial Management.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #7**Field Name:** PM07**Row Name:****Column Name:****Year:** 2003**Field Note:**

Numerator data came from the National Immunization Survey 2003, Centers for Disease Control and Prevention (CDC). This estimate is based on the provider-verified responses for children who live in households with telephones. Statistical methods are used to adjust for children whose parents refuse to participate, those who live in households without telephones, or those whose immunization histories cannot be verified through their providers. The numerator is the estimated number of children with completed immunizations. Denominator data came from the Washington State Office of Financial Management. We adjusted the previous year's data to include only 2 year olds per the detail sheet for this performance measure.

**PERFORMANCE MEASURE # 08**

The rate of birth (per 1,000) for teenagers aged 15 through 17 years.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	23	22.2	16.5	16.1	14
Annual Indicator	17.7	16.8	15.3	15.5	15.5
Numerator	2,251	2,151	1,976	2,006	
Denominator	127,203	128,193	128,868	129,120	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	15.5	15.4	15.4	15.3	15.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #8**Field Name:** PM08**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. In 2005, discussions took place regarding the flattening of the rate to 14.0. The 75th percentile state was at 15.5, which is where Washington is at. Therefore, a 0.1 annual decrease was chosen.

Data were unavailable for the year 2005.

**2. Section Number:** Performance Measure #8**Field Name:** PM08**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source of these data is the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October). The numerator is defined as the number of live births to women ages 15-17. The denominator is the estimate of 15-17 year old women for the year 2003 in Washington on April 2005, from Office of Financial Management. Missing data are excluded. Less than 1% of the age data are missing.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #8**Field Name:** PM08**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source of these data is the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October). The numerator is defined as the number of live births to women ages 15-17. The denominator is the estimate of 15-17 year old women for the year 2003 in Washington on February 2005, from Office of Financial Management. Missing data are excluded. Less than 1% of the age data are missing.



**PERFORMANCE MEASURE # 09**

Percent of third grade children who have received protective sealants on at least one permanent molar tooth.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	48.6	48.9	49.3	49.6	55.5
Annual Indicator	55.5	55.5	55.5	55.5	50.4
Numerator	50,993	45,800	46,009	45,689	41,460
Denominator	91,938	82,570	82,900	82,322	82,261
Is the Data Provisional or Final?				Final	Final

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	55.5	55.5	55.5	55.5	55.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The Smile Survey is only conducted every 5 years, and therefore only two data indicators exist, preventing accurate trend analysis. The 75th percentile state was at 49.4%. The 2000 result of 55.5% was chosen as the future objective through 2010, since it is attainable and is still an improvement from the 2005 result.

The 2005 Washington State Smile Survey is conducted by the Department of Health every five years. During the most recent survey, thirty nine Head start or ECEAP sites and sixty-seven public elementary schools with a 2nd or 3rd grade were randomly selected across the state during the 2004-2005 school year. All preschool children enrolled and present on the day of the screening were included in the sample unless the parent returned a consent form specifically opting out of the sample. Elementary schools could choose to use either an active or passive consent process. Each child participating in the survey received an oral screening exam to determine the child's caries experience, treatment need and urgency, and dental sealants needs. The indicator of 50.4% is gathered from the 2005 SMILE Survey. Denominator data came from the Washington State Office of Financial Management. The numerator is derived from these data.

**2. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2004**Field Note:**

The Smile Survey is currently being conducted, with results pending. New data were unavailable at this time.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #9**Field Name:** PM09**Row Name:****Column Name:****Year:** 2003**Field Note:**

The Smile Survey is currently being conducted, with results pending.

These data were obtained from the Smile Survey 2000. The percent of third grade children who have received protective sealants on at least one permanent molar tooth is 55.5 (95% Confidence Interval is 52.7-58.3). For this survey, an electronic list of all public elementary schools in Washington was obtained from the Office of Superintendent of Public Instruction. Fifty-five schools with at least 25 children in second and/or third grade were randomly selected for participation. Seven of the schools refused to participate resulting in 48 schools with an enrollment of 6,814 children in second and third grade. Of the total 2,699 children who participated, 1,217 were in third grade. Schools who participated were more likely to have a low-income student body, and students who participated were also more likely to be low income. The children taking part in this survey are not representative of the state as a whole, since both minority children and low-income children were over-sampled. Since income has been shown to be related to sealant use, this estimate may underestimate the true percentage of third graders with at least one sealant on a permanent molar tooth. The denominator is the estimated number of 8 year-old children in 2000 reported by the Office of Financial Management, 2002.

**PERFORMANCE MEASURE # 10**

The rate of deaths to children aged 14 years and younger caused by motor vehicle crashes per 100,000 children.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective	3	3	2.9	2.9	2.5
Annual Indicator	2.8	2.7	2.9	1.8	1.8
Numerator	35	34	37	23	
Denominator	1,258,895	1,260,062	1,256,446	1,257,310	
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	2.5	2.4	2.4	2.3	2.3
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: Although there have been some fluctuations, over the past 12 years, an overall decrease has been observed. However, the 2004 rate looks like an anomaly. Rates are very volatile because trends are based on many years of data, therefore future targets may not appear to align with the most recent results. Using a conservative approach, a 0.1 decrease every two years was chosen.

Data were currently unavailable for 2005.

**2. Section Number:** Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source of the data is the Washington State Center for Health Statistics Death Certificate Files (updated annually between September and October). The numerator is defined as the number of Motor Vehicle Crash (MVC) deaths occurring to children aged 0-14 years. The denominator is the estimate number of children 0-14 years old in 2004 in Washington from the Office of Financial Management. The numerator data represent unintentional motor vehicle traffic-related deaths with the following ICD-10 codes: ICD-10 codes: V30-39(.4-.9), V40-49(.4-.9), V50-59(.4-.9), V60-69(.4-.9), V70-79(.4-.9), V81.1,V82.1,V83-V86 (.0-.3), V20-28(.3-.9), V29 (.4-.9), V12-14 (.3-.9), V19 (.4-.6), V02-04(.1-.9),V09.2,V80(.3-.5),V87(.0-.8),V89.2.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #10**Field Name:** PM10**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source of the data is the Washington State Center for Health Statistics Death Certificate Files (updated annually between September and October). The numerator is defined as the number of Motor Vehicle Crash (MVC) deaths occurring to children aged 0-14 years. The denominator is the estimate number of children 0-14 years old in 2003 in Washington from the Office of Financial Management. The numerator data represent unintentional motor vehicle traffic-related deaths with the following ICD-10 codes: ICD-10 codes: V30-39(.4-.9), V40-49(.4-.9), V50-59(.4-.9), V60-69(.4-.9), V70-79(.4-.9), V81.1,V82.1,V83-V86 (.0-.3), V20-28(.3-.9), V29 (.4-.9), V12-14 (.3-.9), V19 (.4-.6), V02-04(.1-.9),V09.2,V80(.3-.5),V87(.0-.8),V89.2.

**PERFORMANCE MEASURE # 11**

The percent of mothers who breastfeed their infants at 6 months of age.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator					52
Numerator					
Denominator					
Is the Data Provisional or Final?				Final	Provisional

  

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	52	53	53	54	54
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #11**Field Name:** PM11**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. Although data at six months has only been available for the past two years, breastfeeding initiation data has been stable for years, as has breastfeeding at two months. Therefore, a one percent increase every two years has been chosen.

This measure has changed from previous years, from breastfeeding at hospital discharge to six months or more after pregnancy. The source of this data (52.0%) is the 2004 National Immunization Survey (NIS). The 2003 NIS results were 57.2%. The numerator is based on the proportion of women who reported breastfeeding at six months or longer. The denominator was obtained from the live birth file, for Washington residents.

**PERFORMANCE MEASURE RETIRED 11**

Percentage of mothers who breastfeed their infants at hospital discharge.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	90.5	91	91.5	92	89
Annual Indicator	90.0	87.0	90.0	90	90
Numerator	69,192	68,733	72,434		
Denominator	76,881	79,003	80,482		
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	89	90	90	90	
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes**

1. **Section Number:** Old Performance Measure #11

**Field Name:** PM11R07**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for 2005.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

2. **Section Number:** Old Performance Measure #11

**Field Name:** PM11R07**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data were unavailable for 2004.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

3. **Section Number:** Old Performance Measure #11

**Field Name:** PM11R07**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source of these data is the 2003 Washington State Pregnancy Risk Assessment Monitoring System (PRAMS). The 2003 PRAMS data are delayed at the CDC and were not available for reporting this year. The numerator is based on the estimated proportion of women who reported breastfeeding at any time in PRAMS. The denominator was obtained from the live birth file, for Washington residents.

**PERFORMANCE MEASURE # 12**

Percentage of newborns who have been screened for hearing before hospital discharge.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective	30	50	70	90	90
Annual Indicator	40.9	62.2	81.0	85.0	88.0
Numerator	32,028	47,550	59,619	67,174	70,830
Denominator	78,310	76,458	73,649	79,028	80,489
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	90	92	94	96	98
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. Given the 88% for 2005 and the continued modest increases, an annual 2% increase was chosen.

In CY 2005, 88% of infants born in Washington hospitals received newborn hearing screening.

**2. Section Number:** Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2004**Field Note:**

In CY 2004, 85% of infants born in Washington hospitals received newborn hearing screening.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #12**Field Name:** PM12**Row Name:****Column Name:****Year:** 2003**Field Note:**

In CY 2003, 81% of infants born in Washington hospitals received newborn hearing screening (59,619 hospital births in Washington (73,649).

**PERFORMANCE MEASURE # 13**

Percent of children without health insurance.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective	6.5	6.4	6.3	6.2	5
Annual Indicator	5.5	4.5	4.5	6.0	6.0
Numerator	83,925	73,077	73,077	98,000	97,158
Denominator	1,525,907	1,623,925	1,623,925	1,638,000	1,619,803
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	5	5	5	5	5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The Washington State Population Survey is conducted every two years. Based on previous years' results, the future target of five percent was chosen through 2010.

The data source is the 2004 Washington State Population Survey, from the Washington State Office of Financial Management (OFM). The State Population Survey is a telephone-based survey that takes place every two years, therefore the 2004 percent was used to create 2005 estimates. Children include persons 0 through age 18. Insurance status was based on time of interview. Estimates are adjusted for missing income or insurance status data.

**2. Section Number:** Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2004**Field Note:**

The data source is the 2004 Washington State Population Survey, from the Washington State Office of Financial Management (OFM). The State Population Survey is a telephone-based survey that takes place every two years. Children include persons 0 through age 18. Insurance status was based on time of interview. Estimates are adjusted for missing income or insurance status data.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #13**Field Name:** PM13**Row Name:****Column Name:****Year:** 2003**Field Note:**

No new data for 2003.

The data source is the 2002 Washington State Population Survey, from the Washington State Office of Financial Management (OFM). The State Population Survey is a telephone-based survey that takes place every two years. Children include persons 0 through age 18. Insurance status was based on time of interview. Estimates are adjusted for missing income or insurance status data.

**PERFORMANCE MEASURE # 14**

Percentage of children, ages 2 to 5 years, receiving WIC services with a Body Mass Index (BMI) at or above the 85th percentile.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator	22.6	22.5	23.1	29.3	29.2
Numerator	19,234	19,477	19,760	25,713	24,679
Denominator	84,936	86,432	85,632	87,693	84,520
Is the Data Provisional or Final?					Final

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	29	29	29	29	29
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #14**Field Name:** PM14**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: Prevalence of overweight children is increasing both nationally and in Washington state. A variety of environmental, genetic, and lifestyle factors are influencing this trend. Only BMI's based on the 95th percentile and above are available for national and state comparison. From 2001-2003 Washington's rates for children on WIC were much lower than the national rate, but the last two years show higher rates than the nation. This may be due in part, to the fact that different states report on different populations. In Washington, the only data provided to CDC is for children on WIC. Other states may report on the entire population of children under 5. Importantly, data collection methodology changed in 2004, therefore the increase should be interpreted with caution since it is likely that much of the change is due to changes in data collection. Between the years 2004-2005, Washington State had a smaller percent increase than that seen in the nation.

For specifically the 85th percentile and above, the last two years of Washington State data have shown a leveling out of the BMI for children ages 2 to 5 years. Therefore, a leveling out of this rate is expected to continue, and the future objectives are an extenuation of the 2005 rate. As more data and information becomes available, this will be revisited.

The previous measure was removed (the percent of potentially Medicaid eligible children who have received a service paid by the Medicaid Program) and incorporated into Health System Capacity Indicator (HSCI) #7. The source of this data is the Washington State Department of Health, Women, Infants, and Children (WIC) program. The numerator is the number of children, ages 2 to 5 years, that receive WIC services during CY 2005. The denominator is number of children, ages 2 to 5 years, that receive WIC services during the reporting year.

**PERFORMANCE MEASURE # 15**

Percentage of women who smoke in the last three months of pregnancy.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator					10.2
Numerator					
Denominator					
Is the Data Provisional or Final?					Provisional

  

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	10	10	10	10	10
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #15**Field Name:** PM15**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses based on the past six years have shown a decrease in women smoking in the third trimester of pregnancy. Washington has one of the lowest smoking rates in the nation, so a flattened rate is envisioned. Therefore, a 10% target was chosen through 2010.

The previous measure was removed (percent of low birth weight infants among all liveborn) and addressed under Health Status Indicator (HSI) #2A. The indicator is based on the proportion of women reporting smoking in the last three months of pregnancy during the calendar from the Pregnancy Risk Assessment Monitoring System (PRAMS) for 2003. The denominator are the number of women delivering babies during the calendar year and are from the Washington State Department of Health Center for Health Statistics. The numerator is derived from this data. Proportions have remained relatively stable over the previous few years: 11.8% (2002), 9.9% (2001), and 11.1% (2000).

Data were unavailable for 2004 and 2005, therefore data reflects the year 2003.



**PERFORMANCE MEASURE # 16**

The rate (per 100,000) of suicide deaths among youths aged 15 through 19.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	11.7	11.7	8.5	8.4	8.9
Annual Indicator	8.0	8.7	9.6	10.2	10.2
Numerator	35	38	42	45	
Denominator	435,035	437,828	439,282	442,824	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	8.9	8.8	8.7	8.6	8.5
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses and interdepartmental discussions took place to choose future objectives. Rates are very volatile because trends are based on many years of data, therefore future targets may not appear to align with the most recent results. A conservative annual decrease of 0.1% was chosen.

Data were unavailable for the year 2005.

**2. Section Number:** Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2004**Field Note:**

The numerator for this rate is defined as the number deaths with ICD 10 Codes X60-X84 and Y87.0 and U03 for youth ages 15-19. The denominator is the estimated population for ages 15-19. The rate is per 100,000 population. The source for the data is the Washington Center for Health Statistics Death Certificate files (updated annually between September and October) and the Office of Financial Management, Intercensal and Postcensal Estimates of County Population by Age and Sex.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #16**Field Name:** PM16**Row Name:****Column Name:****Year:** 2003**Field Note:**

The numerator for this rate is defined as the number deaths with ICD 10 Codes X60-X84 and Y87.0 and U03 for youth ages 15-19. The denominator is the estimated population for ages 15-19. The rate is per 100,000 population. The source for the data is the Washington Center for Health Statistics Death Certificate files (updated annually between September and October) and the Office of Financial Management, Intercensal and Postcensal Estimates of County Population by Age and Sex.

**PERFORMANCE MEASURE # 17**

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	79.6	79.8	80	80.2	85
Annual Indicator	75.4	82.6	83.4	85.9	85.9
Numerator	582	617	627	691	
Denominator	772	747	752	804	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	86	87	87	88	88
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. The number of tertiary care hospitals has increased over time. Therefore, an increase of one percent every two years was chosen.

Data were unavailable for the year 2005.

**2. Section Number:** Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2004**Field Note:**

The numerator is determined by the number of resident very low birth weight (VLBW) births that occur in-state delivered at a hospital providing perinatal intensive care (Level III). In addition to the eleven Level 3 facilities, Kadlec was included because it functions as a level 3 due to geography and services provided, although technically a Level 2. The denominator represents the total number of VLBW resident infants born in-state. The source for this data is the Washington Center for Health Statistics Birth Certificate Files (updated annually between September and October). Missing data are excluded. Less than 1% of the data are missing.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #17**Field Name:** PM17**Row Name:****Column Name:****Year:** 2003**Field Note:**

The percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonates.

The numerator is determined by the number of resident very low birth weight (VLBW) births that occur in-state delivered at a hospital providing perinatal intensive care (Level III). The denominator represents the total number of VLBW resident infants born in-state. The source for this data is the Washington Center for Health Statistics Birth Certificate Files (updated annually between September and October). Missing data are excluded. Less than 1% of data are missing.

**PERFORMANCE MEASURE # 18**

Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	85.5	86	84.2	85.1	83
Annual Indicator	83.2	83.4	80.8	79.1	79.1
Numerator	60,771	60,076	52,885	53,037	
Denominator	73,038	72,055	65,475	67,060	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	80	81	81	82	82
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A new birth certificate was implemented in 2003. The specificity of the question, which asks for the exact date of prenatal care initiation, has resulted in a high amount of missing data. Therefore, a conservative decrease of one percent every two years was chosen. Due to the change in methodology, trend analysis crossing from 2002-2003 cannot be done, and trends can only be based on two years' worth of data (2003-2004).

Data were unavailable for the year 2005.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. NCHS does not believe the methodology is comparable.

**2. Section Number:** Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2004**Field Note:**

The numerator is the number of resident live births with a reported first prenatal visit before 13 weeks gestation. The denominator is the total number of resident live births. Missing data are excluded. In 2004, 17.9% of the data was missing for this measure. The source for these data is the Washington Center for Health Statistics Birth Certificate Files (updated annually between September and October).

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. NCHS does not believe the methodology is comparable.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Performance Measure #18**Field Name:** PM18**Row Name:****Column Name:****Year:** 2003**Field Note:**

The numerator is the number of resident live births with a reported first prenatal visit before 13 weeks gestation. The denominator is the total number of resident live births. Missing data are excluded. In 2003, 8.7% of this data was missing for this measure. The source for these data is the Washington Center for Health Statistics Birth Certificate Files (updated annually between September and October).

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. NCHS does not believe the methodology is comparable.

**STATE PERFORMANCE MEASURE # 1**

The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	44	41	53.9	52.8	
Annual Indicator	53.9	54.6	53.2	52.8	52.8
Numerator	56,619	57,047	56,172	56,110	
Denominator	105,140	104,449	105,588	106,283	
Is the Data Provisional or Final?				Provisional	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	52	52	52	52	52
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The unintended pregnancy rate in Washington has been very stable for several years. Given the stability of this measure, the development of other measures which may have more information is being investigated. Although the number of abortions has decreased, the percent of live births that are unintended has remained stable, keeping this indicator very stable over the past several years.

Data was unavailable for the year 2005.

**2. Section Number:** State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data were unavailable for 2004.

**3. Section Number:** State Performance Measure #1**Field Name:** SM1**Row Name:****Column Name:****Year:** 2003**Field Note:**

The percent of pregnancies that are unintended. The source for the data is the 2003 Washington State PRAMS. This numerator for this measure is derived from [the estimated percentage of unintended pregnancies from Washington State Pregnancy Risk Assessment Monitoring System (PRAMS) survey \*(resident live births + reported resident abortions. The denominator for this measure is the number of resident live births + reported resident abortions. Birth and Abortion data are obtained from the Washington State Center for Health Care Statistics Birth, Fetal Death, and Abortion files for 2003.

**STATE PERFORMANCE MEASURE # 2**

The percent of pregnant women abstaining from smoking.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective	87.5%	88.0%	88.5%	89.0%	
Annual Indicator	87.4	88.0	89.1	89.8	89.8
Numerator	67,779	67,727	70,704	71,197	
Denominator	77,587	76,929	79,328	79,265	
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	89.5	90	90.5	91	91
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: The percent of pregnant women abstaining from smoking has been increasing. The percentage is expected to level out. Therefore an annual increase of 0.5% was chosen for future objectives, as observed in previous years.

Data were unavailable for the year 2005.

**2. Section Number:** State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data were unavailable for 2004. In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. Specifically, changes in smoking may be due wholly or in part to reporting changes.

**3. Section Number:** State Performance Measure #2**Field Name:** SM2**Row Name:****Column Name:****Year:** 2003**Field Note:**

Data were unavailable for 2004. The source for these data is the Washington State Center for Health Statistics Birth Certificate file. The numerator is the number of resident women who reported abstaining from smoking during pregnancy on the birth certificate. The denominator is all resident births in the reporting year. 2% of the data were missing in 2003 are excluded from the denominator. In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. Specifically, changes in smoking may be due wholly or in part to reporting changes.

**STATE PERFORMANCE MEASURE # 3**

The percent of women screened during prenatal care visits for smoking, alcohol use, illegal drug use, HIV status, postpartum birth control plans, domestic violence, and receive genetic counseling.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator	55.5	52.4	54.9	54.9	
Numerator	42,869	40,170	42,838		
Denominator	77,242	76,661	78,029		
Is the Data Provisional or Final?				Provisional	

Annual Objective and Performance Data					
	2006	2007	2008	2009	2010
Annual Performance Objective	55	55	55	55	55
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #3**Field Name:** SM3**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: This is a new performance measure. It is a combination of the previous measures SPM 3, SPM 6, and SPM 8. Recent data has shown a gradual increase, despite fluctuations between years. Therefore, a future objective of 55 was chosen through 2010.

Data were unavailable for the year 2005.

**STATE PERFORMANCE MEASURE # 4**

Percent of children and youth who have people they can turn to for help when they feel sad or hopeless.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator		58.1	58.1	59.6	59.6
Numerator		46,990	47,698	53,622	
Denominator		80,877	82,097	89,970	
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	60	60	60	60	60
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #4**Field Name:** SM4**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: This is a new performance measure, and there are only two years of data available, since the Healthy Youth Survey is administered every two years. Future objectives are an extension of previous results. As more data becomes available, additional analysis will be conducted to determine appropriate future objectives.

No new data is available for the year 2005. The survey will be readministered in 2006.

**STATE PERFORMANCE MEASURE # 5**

Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator					40
Numerator					
Denominator					
Is the Data Provisional or Final?					Final

  

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	70	85	95	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: This new performance measure for the period of 2005-2009, is a process measure, which differs from the other measures, which are outcome-oriented. The work being accomplished is groundbreaking and harder to quantify. Therefore, it will be assessed through benchmarks (statements describing the work that has been conducted each year). Since there are 20 benchmarks for the five year period, each benchmark is equivalent to five percentage points; at the end of the five years, 100% of the benchmarks seek to be attained. Each benchmark relates to the usage of Bright Futures materials and principles by providers in Washington State. The following benchmarks have been attained, including a few from Year 2 that were accomplished ahead of schedule.

**Year 1**

1. Form internal (DOH) Bright Futures working/advisory group

•Presented Bright Futures to MIH, CAH, CSHCN. Recruited one person from each section to be the Bright Futures point person.

2. Plan for establishing inter-agency Bright Futures group—including for example schools or OSPI, American Academy of Pediatrics national and state chapters, family practitioners, Medicaid (DSHS), health plans

•All of the above entities have been present at Bright Futures presentations, trainings, or other meetings.

3. Provide support and technical assistance to groups of professionals recently trained in use of Bright Futures: the school nurse corps supervisors, early childhood providers participating in Bright Futures in Early Childhood

•Contact continues with trained group of SNC nurses and the idea of training teams to reach others with less access is being explored.

•The Bright Futures in Early Childhood Project continues until June 30, 2006; a product and plan is being developed to disseminate lessons learned to other child care providers and health staff.

4. Develop plan for assessment of current use of Bright Futures by health, social service and education providers in the state

•Surveys have been done of school nurses, child care health consultants, and early childhood education staff, on if and how they use BF; level of awareness.

•Beginning evaluation of survey results.

5. Develop plan for using Bright Futures Oral Health in statewide trainings

•Presented Bright Futures as a tool for oral health at annual meeting of local health jurisdiction oral health coordinators.

•Continued coordination and dialogue between state oral health staff and Bright Futures staff and project participants.

6. Begin implementation of the grant-funded project to train foster families in mental health issues using Bright Futures

\*Curriculum designed and training begun; to continue through spring 2006.

**Year 2**

7. Disseminate findings/successes/lessons learned from Bright Futures in Early Childhood Project

\*Gathered preliminary evaluation data.

8. Begin assessment of the current use of Bright Futures by Washington State providers

\*Surveys completed in year 1 of allied health providers.

**2. Section Number:** State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2004**Field Note:****3. Section Number:** State Performance Measure #5**Field Name:** SM5**Row Name:****Column Name:****Year:** 2003**Field Note:**



**STATE PERFORMANCE MEASURE # 6**

Percent of children 6-8 years old with dental caries experience in primary and permanent teeth.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator	55.6	55.6	55.6	55.6	59.0
Numerator	140,000	137,685	136,477	136,345	145,873
Denominator	251,798	247,635	245,462	245,224	247,243
Is the Data Provisional or Final?				Final	Final

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	52.2	48.8	45.4	42	42
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #6**Field Name:** SM6**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: This is a new performance measure, and there are only two years of data available since the Smile Survey is administered every five years. As more data becomes available, additional analyses will be conducted to determine appropriate future objectives.

The source of the data is the 2005 Washington State SMILE Survey. The indicator reflects the proportion of 6-8 year olds with dental caries experience in primary and permanent teeth. The source of the denominator data is the Office of Financial Management Population Forecast. The numerator is calculated from both of these.

**STATE PERFORMANCE MEASURE # 7**

Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective					
Annual Indicator					25.2
Numerator					
Denominator					
Is the Data Provisional or Final?					Final

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	54	82.8	97.2	100	100
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** State Performance Measure #7**Field Name:** SM7**Row Name:****Column Name:****Year:** 2005**Field Note:**

See SPM 5 for more details about benchmarks/process measures.

Benchmarks: Year 1

1. Identify state OMCH activities to promote health, safety, and school readiness of children 0-5 years old.

-Created Inventory of EC services/programs across OMCH regarding health and school readiness

-Developed matrix of EC activities within OMCH

2. Provide training, technical assistance (TA) and consultation to Child Care Health Consultants (CCHCs) to raise awareness regarding health, safety, and school readiness.

-A full-time consultant is available to the child care health consultants to provide training and technical assistance.

-Quarterly regional meetings regarding consultation for infants/toddlers in child care include CCHCs, licensors, health specialists, others involved in child care and training for providers.

-CCHCs are connected to information and resources from the State Health and Safety Advisory Committee, and are offered a bi-annual conference on early childhood care.

3. Increase awareness and use of Early Childhood Comprehensive Systems (ECCS) plan (Kids Matter (KM)) by state &amp; local partners.

-Completed Awareness and Evaluation Survey of Kids Matter to document baseline data regarding awareness and utilization of KM plan among early childhood stakeholders. See Stakeholder Survey Report and Methodological Report March 2006.

4. Track OMCH school readiness efforts based on KM plan.

-CHILD Profile integration of Early Learning Benchmarks into CHILD Profile Development Posters and Getting School Ready booklet integrated into mailings.

-DOH Medical Home Strike Team integrating Kids Matter focus on Medical Home in children 0-5 years.

-CSHCN, Medical Home Grant and Strategic Planning Process utilizing KM Plan.

-PHND-EC Logic Model development regarding PH services for children and families utilizing KM Plan.

-Infant Mental Health Strategic Planning efforts utilizing KM Plan.

-Mental Health Transformation Grant referencing KM Plan regarding prevention and children's mental health.

5. Facilitate OMCH Early Childhood Workgroup to address &amp; increase integration regarding health, safety, and school readiness of children 0-5.

-Convened representatives from across sections in OMCH monthly to share integration opportunities between and among OMCH and Kids Matter and model reciprocal activities.

-Determining the need to formalize workgroup with appropriate charter.

-Integration Continuum, by Konrad reference document for integration opportunities identified as reference for work across OMCH &amp; school readiness.

6. Add representatives of Healthy Child Care Washington (HCCW) to the State Joint Early Childhood Advisory Committee of KM.

-HCCW will be represented through the ECCS Lead and CAH-Early Childhood Team Lead.

7. Expand CCHC and CHILD Profile activities into HCCW system.

-Conducted trainings for CCHCs in CHILD Profile registry at limited number of pilot sites; examining feasibility (system and fiscal) of expanded use.

**FORM 12**  
**TRACKING HEALTH OUTCOME MEASURES**  
[SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)]  
**STATE: WA**

**Form Level Notes for Form 12**

None

**OUTCOME MEASURE # 01**

The infant mortality rate per 1,000 live births.

<b>Annual Objective and Performance Data</b>					
	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
<b>Annual Performance Objective</b>	5.5	5.4	5.3	5.2	5.5
<b>Annual Indicator</b>	5.8	5.7	5.6	5.5	5.5
<b>Numerator</b>	461	452	447	451	
<b>Denominator</b>	79,542	79,003	80,482	81,715	
<b>Is the Data Provisional or Final?</b>				Final	Provisional

<b>Annual Objective and Performance Data</b>					
	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>
<b>Annual Performance Objective</b>	5.5	5.5	5.5	5.5	5.5
<b>Annual Indicator</b>					
<b>Numerator</b>	Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.				
<b>Denominator</b>					

**Field Level Notes**

**1. Section Number:** Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states was used to create the future objectives. The 75th percentile was 5.4, and given previous years' results, 5.5 was chosen as the objective through 2010.

Data were unavailable for the year 2005.

**2. Section Number:** Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Infant mortality rate is defined as the (number of deaths to children less than one-year old divided by the total number of live births) \*1000. The source for these data is Mortality Table F6 reported in the Washington State Vital Statistics Report, 2004, from linked Birth and Death Certificate Files.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Outcome Measure 1

**Field Name:** OM01

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

Infant mortality rate is defined as the (number of deaths to children less than one-year old divided by the total number of live births) \*1000. The source for these data is Mortality Table F6 reported in the Washington State Vital Statistics Report, 2003, from linked Birth and Death Certificate Files.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

**OUTCOME MEASURE # 02**

The ratio of the black infant mortality rate to the white infant mortality rate.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	2.1	2.1	2	2	1.6
Annual Indicator	2.1	1.7	1.7	2.2	2.2
Numerator	11.6	8.9	8.5	10.7	
Denominator	5.5	5.2	4.9	4.9	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	1.6	1.6	1.6	1.6	1.6
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Outcome Measure 2**Field Name:** OM02**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses based on the past twelve years have shown an overall gradual decrease. Therefore, a future objective of 1.6 was chosen through 2010.

Data were unavailable for the year 2005.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

**2. Section Number:** Outcome Measure 2**Field Name:** OM02**Row Name:****Column Name:****Year:** 2004**Field Note:**

The ratio is represented by the mortality rate for black infants/mortality rate for white infants by the definition given in (1). The source for these data is Mortality Table F6 reported in the Washington State Vital Statistics Report, 2004, from linked Birth and Death Certificate Files. The race of the mother is used.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Outcome Measure 2**Field Name:** OM02**Row Name:****Column Name:****Year:** 2003**Field Note:**

The ratio is represented by the mortality rate for black infants/mortality rate for white infants by the definition given in (1). The source for these data is Mortality Table F6 reported in the Washington State Vital Statistics Report, 2003, from linked Birth and Death Certificate Files. The race of the mother is used.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

**OUTCOME MEASURE # 03**

The neonatal mortality rate per 1,000 live births.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	3.4	3.3	3.2	3.2	3.6
Annual Indicator	3.7	3.6	3.8	3.3	3.3
Numerator	292	287	302	273	
Denominator	79,542	79,003	80,482	81,715	
Is the Data Provisional or Final?				Final	Provisional

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	3.6	3.5	3.5	3.4	3.4
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: While rates are highly variable, trend analyses based on the past eight years resulted in future objectives with a 0.1 decrease every two years.

Data were unavailable for the year 2005.

**2. Section Number:** Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2004**Field Note:**

The rate is determined by (the number of resident infant deaths occurring within the first 27 days of life divided by the total number resident live births)\*1000. The source for these data is Mortality Table F8 reported in the Washington State Vital Statistics Report, 2004, from linked Birth and Death Certificate Files.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Outcome Measure 3**Field Name:** OM03**Row Name:****Column Name:****Year:** 2003**Field Note:**

The rate is determined by (the number of resident infant deaths occurring within the first 27 days of life divided by the total number resident live births)\*1000. The source for these data is Mortality Table F8 reported in the Washington State Vital Statistics Report, 2003, from linked Birth and Death Certificate Files.

**OUTCOME MEASURE # 04**

The postneonatal mortality rate per 1,000 live births.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective	2.1	2.1	2	2	1.9
Annual Indicator	2.1	2.1	1.8	2.2	2.2
Numerator	169	165	145	178	
Denominator	79,542	79,003	80,482	81,715	
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	1.9	1.9	1.9	1.9	1.9
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: While rates are highly variable, trend analyses based on the past seven years have resulted in a future objective of 1.9 through 2010.

Data were unavailable for the year 2005.

**2. Section Number:** Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2004**Field Note:**

This rate is determined by (The number of deaths occurring to resident infants 28-364 days of age divided by the total number of resident live births)\*1000. The source for these data is Mortality Table F4 reported in the Washington State Vital Statistics Report, 2004, from linked Birth and Death Certificate Files.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Outcome Measure 4**Field Name:** OM04**Row Name:****Column Name:****Year:** 2003**Field Note:**

This rate is determined by (The number of deaths occurring to resident infants 28-364 days of age divided by the total number of resident live births)\*1000. The source for these data is Mortality Table F4 reported in the Washington State Vital Statistics Report, 2003, from linked Birth and Death Certificate Files.

**OUTCOME MEASURE # 05**

The perinatal mortality rate per 1,000 live births plus fetal deaths.

	<u>Annual Objective and Performance Data</u>				
	2001	2002	2003	2004	2005
Annual Performance Objective	8.4	8.3	8.3	8.2	8.4
Annual Indicator	8.2	8.3	9.1	7.8	7.8
Numerator	652	657	734	639	
Denominator	79,960	79,437	80,980	81,715	
Is the Data Provisional or Final?				Final	Provisional

	<u>Annual Objective and Performance Data</u>				
	2006	2007	2008	2009	2010
Annual Performance Objective	8.3	8.2	8.2	8.1	8.1
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: Trend analyses based on the past 14 years have shown a very gradual decrease, resulting in a future objective of 8.4 through 2010.

Data were unavailable for the year 2005.

**2. Section Number:** Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2004**Field Note:**

The rate is determined by [The number of resident fetal deaths > 20 weeks gestation + resident infant deaths within the first 6 days of life divided by the total resident live births + Fetal deaths]\*1000. The source for these data is Mortality Table F8 reported in the Washington State Vital Statistics Report, 2004, from linked Birth and Death Certificate Files.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Outcome Measure 5**Field Name:** OM05**Row Name:****Column Name:****Year:** 2003**Field Note:**

The rate is determined by [The number of resident fetal deaths > 20 weeks gestation + resident infant deaths within the first 6 days of life divided by the total resident live births + Fetal deaths]\*1000. The source for these data is Mortality Table F8 reported in the Washington State Vital Statistics Report, 2003, from linked Birth and Death Certificate Files.

**OUTCOME MEASURE # 06**

The child death rate per 100,000 children aged 1 through 14.

<u>Annual Objective and Performance Data</u>					
	2001	2002	2003	2004	2005
Annual Performance Objective	21.4	21	20.6	20.2	17
Annual Indicator	17.9	18.5	18.5	15.0	15
Numerator	211	218	218	176	
Denominator	1,180,712	1,181,317	1,177,891	1,176,838	
Is the Data Provisional or Final?				Final	Provisional

  

<u>Annual Objective and Performance Data</u>					
	2006	2007	2008	2009	2010
Annual Performance Objective	18.4	18.4	18.3	18.3	18.2
Annual Indicator					
Numerator					
Denominator					

Please fill in only the Objectives for the above years. Numerator, Denominator and Annual Indicators are not required for future year data.

**Field Level Notes****1. Section Number:** Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2005**Field Note:**

PERFORMANCE OBJECTIVES: A combination of trend analyses and comparisons to other states were used to create the future objectives. The data for 2004 looks like an outlier, and given that the 75th percentile was 18.0, a 0.1 percent decrease every two years was chosen.

Data were unavailable for the year 2005.

**2. Section Number:** Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2004**Field Note:**

The source for this data is the Washington Center for Health Statistics Death Certificate Files (updated annually between September and October) and reported in Washington State Vital Statistics. The rate reflects deaths to children ages 1-14 from all causes divided by the population ages 1-14. The population figures are from Office of Financial Management.

PERFORMANCE OBJECTIVES: Future targets were chosen from a combination of Maternal and Child Health staff discussions and trend analyses.

**3. Section Number:** Outcome Measure 6**Field Name:** OM06**Row Name:****Column Name:****Year:** 2003**Field Note:**

The source for this data is the Washington Center for Health Statistics Death Certificate Files (updated annually between September and October) and reported in Washington State Vital Statistics. The rate reflects deaths to children ages 1-14 from all causes divided by the population ages 1-14. The population figures are from Office of Financial Management.



**FORM 13**  
**CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS**  
**STATE: WA**

1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate.

3

2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups.

3

3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process.

3

4. Family members are involved in service training of CSHCN staff and providers.

3

5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member).

3

6. Family members of diverse cultures are involved in all of the above activities.

3

**Total Score:** 18

**Rating Key**

0 = Not Met

1 = Partially Met

2 = Mostly Met

3 = Completely Met

**FORM NOTES FOR FORM 13**

None

**FIELD LEVEL NOTES**

None

**FORM 14**  
**LIST OF MCH PRIORITY NEEDS**

*[Sec. 505(a)(5)]*

**STATE: WA    FY: 2007**

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase, list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

1.        Adequate nutrition and physical activity.
2.        Lifestyles free of substance use and addiction.
3.        Optimal mental health and healthy relationships.
4.        Reduce health disparities in the MCH population.
5.        Safe and healthy communities.
6.        Healthy physical growth and cognitive development.
7.        Sexual health and sexual responsibility.
8.        Access to preventive and treatment services.
9.        Quality screening, identification, intervention, and care coordination.
- 10.

**FORM NOTES FOR FORM 14**

None

**FIELD LEVEL NOTES**

None

**FORM 15**  
**TECHNICAL ASSISTANCE(TA) REQUEST**

STATE: WA

APPLICATION YEAR: 2007

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
1.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	CSHCN Program	Improve quality of data collected on CSHCN using local public health CSHCN programs to include elements of ethnicity, education, and economic levels so information can be used in program development.	An expert trainer in cultural competency and interviewing skills.
2.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Integration	OMCH needs expert facilitation to focus on intra-agency collaboration to improve the health services system for children and families	An expert facilitator in systems integration.
3.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Genetics Education	OMCH would like to bring a nationally known speaker to an educational conference being planned in 2007 for genetic service providers.	A nationally recognized speaker on genetics issues.
4.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Adolescent Health	OMCH needs assistance to collaborate with other state and territorial adolescent health coordinators in order to improve access to national resources and experts on adolescent health.	MCHB
5.	<b>General Systems Capacity Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      N/A      </u>	Maternal and Infant Health	OMCH needs assessment expertise to design qualitative research tools to conduct qualitative data collection related to preconception health attitudes, behaviors, and services.	An expert epidemiologist with experience in qualitative research and preconception health.
6.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      7      </u>	Immunization Education	OMCH would like to bring a nationally known immunization speaker to an educational and training conference for immunization providers that is being planned for May 2007.	An expert on immunization best practices and increasing child immunization rates.
7.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      3      </u>	Medical Homes for Children with Special Health Care Needs	The CSHCN Program requests a national expert on Medical Home Spread to present to the Medical Home Leadership Network Teams in Spring 2007.	An expert on Medical Home spread.
8.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      2      </u>	Family-Professional Partnerships	The CSHCN Program needs input from a national expert related to family leadership for families with children with special health care needs.	A national expert related to family leadership
9.	<b>National Performance Measure Issues</b> If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>      6      </u>	Adolescent Health Transition	The CSHCN Program requests a national expert on adolescent health transition issues to provide consultation on identifying and addressing barriers to adult care to the Adolescent Health Transition Project Special Interest Group.	An expert on adolescent health transition issues.
10.	<b>Data-related Issues - Data Systems Development</b> If you selected State or National		Annual MCH EPI conference is held in the	

	Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>    N/A    </u>	Western Regional MCH Epidemiology Conference	Southeast US. It is difficult for MCH epidemiology staff in the Northwest to get there. Fund a Western regional MCH epidemiology conference.	MCHB
11.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>          </u>			
12.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: <u>          </u>			

**FORM NOTES FOR FORM 15**

None

**FIELD LEVEL NOTES**

None

**FORM 16**  
**STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET**  
**STATE: WA**

SP # 1

**PERFORMANCE MEASURE:**

The percent of pregnancies (live births, fetal deaths, abortions) that are unintended.

**STATUS:**

Active

**GOAL**

Reduce the number of unplanned pregnancies.

**DEFINITION**

THIS SPM IS A CONTINUATION FROM SPM 1 IN THE 2000-2004 NEEDS ASSESSMENT.

**Numerator:**

Numerator: Estimate of all unintended births from PRAMS data, similar proportion of fetal deaths, plus all abortions.

**Denominator:**

Denominator: All live births and fetal deaths plus abortions.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Related to Healthy People 2010 Objective 9-1

Related to Objective 9-1: Increase the proportion of pregnancies that are intended to 70%. (Baseline 51% of all pregnancies among females 15-44 years were intended in 1995)

**DATA SOURCES AND DATA ISSUES**

PRAMS and WA State Center for Health Statistics abortion data files. This estimate assumes all abortions are the result of unintended pregnancy and that the proportion of fetal deaths which are unintended is the same as the proportion of live births. A small percentage of abortions will be due to fetal or maternal condition and not the result of an unintended pregnancy.

**SIGNIFICANCE**

Unintended pregnancy is correlated with late or inadequate prenatal care, low birth weight, neonatal death, domestic violence, child abuse, and exposure of the fetus to harmful substances like tobacco, alcohol, and other drugs. It is associated with social and economic co-factors such as economic hardship, marital dissolution, failure to achieve educational goals, and spousal abuse.



SP # 2

**PERFORMANCE MEASURE:**

The percent of pregnant women abstaining from smoking.

**STATUS:**

Active

**GOAL**

Increase abstinence from tobacco during pregnancy.

**DEFINITION**

THIS SPM IS A CONTINUATION FROM SPM 2 IN THE 2000-2004 NEEDS ASSESSMENT.

**Numerator:**

Number of women reporting tobacco use during pregnancy from Birth Certificate data.

**Denominator:**

All live births.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

The Healthy People 2010 Objective for this measure is 99%

Related to Objective 16-17c: Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women to 99%.  
(Baseline for smoking was 87% in 1998).

**DATA SOURCES AND DATA ISSUES**

Birth Certificate data.

**SIGNIFICANCE**

Maternal smoking during pregnancy is a risk factor for low birth weight, the leading cause of infant mortality as well as congenital malformations.

SP # 3

**PERFORMANCE MEASURE:**

The percent of women screened during prenatal care visits for smoking, alcohol use, illegal drug use, HIV status, postpartum birth control plans, domestic violence, and receive genetic counseling.

**STATUS:**

Active

**GOAL**

To improve access to comprehensive prenatal care that includes universal screening for smoking, alcohol use, illegal drug use, HIV status, postpartum birth control plans, domestic violence and receive counseling on tests for birth defects or genetic diseases.

**DEFINITION**

THIS SPM IS A COMBINATION OF SPMs 3, 6, AND 8 FROM THE 2000-2004 NEEDS ASSESSMENT.

**Numerator:**

Number of women who have delivered a live birth who report that their doctor, nurse or other health care provider talked to them during prenatal care visits about smoking, drinking alcohol, post-partum birth controls, illegal drugs, domestic violence, receive counseling on tests for birth defects or genetic diseases, and getting tested for HIV. (based on PRAMS data weighted for statewide estimates.)

**Denominator:**

All pregnant women who have delivered a live birth (based on PRAMS data weighted for statewide estimate).

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Related to Healthy People 2010 Objectives 16-17 and 25-17

Related to HP 2010 Objective 16-17: Increase abstinence from alcohol, cigarettes, and illicit drugs among pregnant women; and Objective 25-17: Increase the proportion of pregnant females screened for sexually transmitted diseases (including HIV infection and bacterial vaginosis) during prenatal health care visits, according to recognized standards.

**DATA SOURCES AND DATA ISSUES**

PRAMS provides data on all of these issues.

**SIGNIFICANCE**

Universal screening during prenatal care visits for smoking, alcohol use, illegal drug use, HIV status, domestic violence, genetic counseling, and postpartum birth control provides opportunities to identify high risk behaviors and conditions so that interventions can be provided to reduce smoking, alcohol and illegal drug use; reduce perinatal transmission of HIV; reduce domestic violence; increase genetic counseling screening; and reduce subsequent unintended pregnancies.

SP # 4

**PERFORMANCE MEASURE:**

Percent of children and youth who have people they can turn to for help when they feel sad or hopeless.

**STATUS:**

Active

**GOAL**

Increase the proportion of children and youth who have people they can turn to for help when they feel sad or hopeless.

**DEFINITION**

THIS IS A NEW SPM. THE TWO PREVIOUS SPMs ADDRESSING MENTAL HEALTH HAVE BEEN DISCONTINUED.

**Numerator:**

Number of tenth graders who have people they can turn to for help when they feel sad or hopeless.

**Denominator:**

Tenth graders

**Units:** 100   **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

Related to HP 2010 overall Mental Health and Mental Disorders Goal: Improve mental health and ensure access to appropriate, quality, mental health services.

**DATA SOURCES AND DATA ISSUES**

The Healthy Youth Survey will be the instrument used to gather this data. Tenth grade students have been chosen, and will be used in this measure.

**SIGNIFICANCE**

It has been estimated that as many as 20% of children and adolescents have a diagnosable behavioral, emotional, or mental disorder. Furthermore, these conditions can lead to substance use, violent behaviors (including suicide attempts) and may limit educational attainment. Because this is a new priority for MCH and because limited data exist on some mental health issues (i.e., the level of need for mental health services by MCH populations in the State of Washington), the initial focus of MCh's efforts will be on assessment.

SP # 5

**PERFORMANCE MEASURE:**

Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.

**STATUS:**

Active

**GOAL**

Promote the use of Bright Futures materials and principles by health, social service, and education providers in Washington State.

**DEFINITION**

THIS IS A NEW SPM. Description of Bright Futures: Bright Futures is a vision, a philosophy, a set of expert guidelines, and a practical developmental approach to providing health supervision for children of all ages, from birth through adolescence. Bright Futures is endorsed by the American Academy of Pediatrics as an example of "best practices" in health supervision of children and youth. Modules and guidelines also exist on the subjects of mental health, oral health, physical activity, and nutrition. Efforts to promote the use of Bright Futures involve increasing awareness in and outside of DOH, training specific groups of professionals or potential users (like parents), and providing continuing support for those already trained while reaching out to new groups. Assessment of needs, evaluation of interventions, and dissemination of knowledge and practice are integral parts of the outreach and training

**Numerator:**

The number of performance measure benchmarks Washington has reached towards assessing the usage of Bright Futures materials and principles.

**Denominator:**

Total number of benchmarks. Please see Field Notes.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Data related focus areas will include: Data will be obtained from trainings provided and programs given by DOH or its contractors. An assessment of use of Bright Futures by health professionals will provide a baseline.

**SIGNIFICANCE**

Background and significance of Bright Futures materials and principles: Bright Futures materials are designed in a way to be accessible to parents and non-professional caretakers, as well as health care professionals. Increasing access to health services is a priority of state health and political entities. Bright Futures guidelines provide a way to assess and improve the quality of the services, whether they are provided in a clinical setting, a school, or a community setting. Bright Futures also is an accessible and understandable way for child health workers to become familiar with stages of development, and the basics of mental health, oral health, physical activity, and nutrition. A need exists for practical training models and technical assistance to those starting to use Bright Futures.

SP # 6

**PERFORMANCE MEASURE:**

Percent of children 6-8 years old with dental caries experience in primary and permanent teeth.

**STATUS:**

Active

**GOAL**

Reduce the percent of children 6-8 years old with dental caries experience in primary and permanent teeth to the Healthy People 2010 goal of 42% (2005 baseline is 59%). Although the national goal will be sought, it is important to remember that Washington State children currently suffer substantially from dental decay as compared to the nation. The new state program has started to invest heavily in the promotion of water fluoridation and sealants to achieve the HP 2010 target.

**DEFINITION**

THIS IS A NEW SPM.

**Numerator:**

Children 6-8 years old with dental caries experience in primary and permanent teeth

**Denominator:**

Children 6-8 years old

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

The Healthy People 2010 Objective for this measure is 42%

Related to Objective 21-1b: Reduce the proportion of children with dental caries experience in their primary and permanent teeth to 42%. (Baseline: 52% of children aged 6 to 8 years had dental caries experience in 1988-1994).

**DATA SOURCES AND DATA ISSUES**

In order to track the trend of decay experience in our children, the results of the Washington State Smile Survey 1994, 2000, 2005, 2010 will be utilized. Additionally, Washington State's new oral health surveillance system will also provide information. Through these data sources, better monitoring and information distribution about decay experience will take place.

**SIGNIFICANCE**

Dental caries experience in 6-8 years old is a well-known measure of oral health status. Its reduction has been recommended by the CDC, and is one of the objectives of the national Healthy People document. As progress is made, the heightened awareness and the identification of this new measure is very meaningful to Washington State. Challenges in the accomplishment of this measure include severe staff shortage for the past five years, and not being ranked well in the two most cost-effective preventive measures for dental decay: traditionally observed low rates of water fluoridation, and more recently, a decline in the use of school-based dental sealants. As a consequence, it is expected that Washington children will continue to suffer from substantial dental decay, as reflected in the results of the Smile Survey 2005. The new state oral health program is taking serious steps towards improving this situation, and it will take a lot of effort and partnerships to revert such a scenario. Despite these challenges, confidence remains that a difference and improvement in the lives of Washington children will be attained.

SP # 7

**PERFORMANCE MEASURE:**

Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.

**STATUS:**

Active

**GOAL**

Strengthen statewide system capacity to promote health, safety, and school readiness of children birth to kindergarten entry.

**DEFINITION**

THIS IS A NEW SPM. Identify and track OMCH activities that affect the health of young children, and integrate elements of Kids Matter plan into existing and new activities and groups. Healthy Child Care Washington, a system that supports child care health consultants, will become more integrated with Kids Matter through training of professionals and improving data collection, evaluation, and dissemination of knowledge gained.

**Numerator:**

The number of performance measure benchmarks Washington has reached to increase statewide system capacity to promote health, safety, and school readiness.

**Denominator:**

Total number of benchmarks. Please see Field Notes.

**Units:** 100 **Text:** Percent

**HEALTHY PEOPLE 2010 OBJECTIVE**

**DATA SOURCES AND DATA ISSUES**

Data will come from the Child and Adolescent Health Program.

**SIGNIFICANCE**

The Washington State Department of Health, Maternal and Child Health Office (MCH) has taken a comprehensive approach to building an integrated public health/child care/early childhood framework throughout Washington State in order to ensure the health and safety of the 60-70% of children under age 5 who are estimated to attend out-of-home care. This approach encompasses both the immediate physical needs of children as well as the developmental and emotional health in order to support children's readiness to learn at school entry. MCH activities have focused in five areas: Access to health, Childhood MCH, Early childhood education, and parental and family support. All of these MCH activities aim to provide training and resources to better understand the health status and provide for the developmental needs of children in child care/early childhood.

**FORM NOTES FOR FORM 16**

None

**FIELD LEVEL NOTES**

None

**FORM 17**  
**HEALTH SYSTEMS CAPACITY INDICATORS**  
**FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA**  
**STATE: WA**

**Form Level Notes for Form 17**

None

**HEALTH SYSTEMS CAPACITY MEASURE # 01**

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

		<u>Annual Indicator Data</u>				
		2001	2002	2003	2004	2005
<b>Annual Indicator</b>	32.5	33.6	25.8	30.6	30.6	
<b>Numerator</b>	1,295	1,342	1,029	1,226		
<b>Denominator</b>	398,000	399,421	399,183	401,222		
<b>Is the Data Provisional or Final?</b>					Final	Provisional

**Field Level Notes**

- Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

- Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

These data come from the Washington State Hospital Discharge database (CHARS) and are updated annually. The numerator represents the number of hospital discharges for children less than 5 years of age who had a primary diagnosis of asthma (ICD-9 codes 493.0-493.9). The denominator represents the number of children less than 5 years of age in Washington from Office of Financial Management.

- Section Number:** Health Systems Capacity Indicator #01

**Field Name:** HSC01

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

These data come from the Washington State Hospital Discharge database (CHARS) and are updated annually. The numerator represents the number of hospital discharges for children less than 5 years of age who had a primary diagnosis of asthma (ICD-9 codes 493.0-493.9). The denominator represents the number of children less than 5 years of age in Washington from Office of Financial Management



**HEALTH SYSTEMS CAPACITY MEASURE # 02**

The percent Medicaid enrollees whose age is less than one year during the reporting year who received at least one initial periodic screen.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
<b>Annual Indicator</b>	85.0	97.0	98.6	98.6	98.6
<b>Numerator</b>	31,453	31,435	32,487	35,011	
<b>Denominator</b>	37,003	32,407	32,948	35,509	
<b>Is the Data Provisional or Final?</b>				Final	Provisional

**Field Level Notes****1. Section Number:** Health Systems Capacity Indicator #02**Field Name:** HSC02**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005.

**2. Section Number:** Health Systems Capacity Indicator #02**Field Name:** HSC02**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data: 35,011/35,509 = 98.6%

Note: These data are based on the Washington State 2004 HEDIS Report from the Department of Social and Health Services and reflect the estimated statewide proportion of children who turned 15 months old during the reporting year, who were enrolled from 31 days of age in Medicaid or SCHIP and who received at least one well child visit. Data from seven managed care plans (who serve approximately 70% of the Medicaid enrollees less than 15 months) contributed to this report. Children not covered by managed care plans include those on SSI, in foster care, and resident who live in counties without a managed care option. The 2004 HEDIS percentage was used as an estimate for 2005, since no new data are available.

**3. Section Number:** Health Systems Capacity Indicator #02**Field Name:** HSC02**Row Name:****Column Name:****Year:** 2003**Field Note:**

These data are based on the Washington State 2004 HEDIS Report from the Department of Social and Health Services and reflect the estimated statewide proportion of children who turned 15 months old during the reporting year, who were enrolled from 31 days of age in Medicaid or SCHIP and who received at least one well child visit. Data from seven managed care plans (who serve approximately 70% of the Medicaid enrollees less than 15 months) contributed to this report. Children not covered by managed care plans include those on SSI, in foster care, and residents who live in counties without a managed care option.

**HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (CHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
<b>Annual Indicator</b>	85.0	NaN	NaN	0.0	0.0
<b>Numerator</b>	5,244	0	0	0	0
<b>Denominator</b>	6,169	0	0	1	1
<b>Is the Data Provisional or Final?</b>				Final	Final

**Field Level Notes****1. Section Number:** Health Systems Capacity Indicator #03**Field Name:** HSC03**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005. This is a very small population, and the numbers are not reportable. Because data specific to the CHIP enrollees are not available through HEDIS for this age group, this measure currently cannot be reported. Washington CHIP covers from 200 to 250% of the poverty level.

**2. Section Number:** Health Systems Capacity Indicator #03**Field Name:** HSC03**Row Name:****Column Name:****Year:** 2004**Field Note:**

The data from the previous years reflects all CHIP enrollees, not just children less than 1 year. In 2004, there were approximately 298 children less than 15 months during the reporting year who were covered by the State Children's Health Insurance Plan. A little over half of these children were enrolled in managed care plans. Their well child experience is included in the Washington State 2004 HEDIS Report from the Department of Social and Health Services. Because data specific to the CHIP enrollees are not available through HEDIS for this age group, we are currently unable to report on this measure. Washington CHIP covers from 200 to 250% of the poverty level.

**3. Section Number:** Health Systems Capacity Indicator #03**Field Name:** HSC03**Row Name:****Column Name:****Year:** 2003**Field Note:**

HSC3: The data from the previous years reflects all CHIP enrollees, not just children less than 1 year. In 2003, there were approximately 194 children less than 15 months during the reporting year who were covered by the State Children's Health Insurance Plan. A little over half of these children were enrolled in managed care plans. Their well child experience is included in the Washington State 2004 HEDIS Report from the Department of Social and Health Services. Because data specific to the CHIP enrollees are not available through HEDIS for this age group, we are currently unable to report on this measure. Washington CHIP covers from 200 to 250% of the poverty level.

**HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

Annual Indicator Data					
	2001	2002	2003	2004	2005
Annual Indicator	70.8	71.1	66.3	61.6	61.6
Numerator	49,117	48,547	41,128	41,243	
Denominator	69,377	68,324	62,080	66,926	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes****1. Section Number:** Health Systems Capacity Indicator #04**Field Name:** HSC04**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005.

**2. Section Number:** Health Systems Capacity Indicator #04**Field Name:** HSC04**Row Name:****Column Name:****Year:** 2004**Field Note:**

These data come from the Washington State Center for Health Statistics Birth Certificate Files and are updated annually. The numerator represents the number of resident women (15-44 with a live birth) whose Adequacy of Prenatal Care Utilization (APNCU) index is greater than or equal to 80%. The denominator represents all resident women (15-44) with a live birth during the reporting year. Approximately 18% of the data fall outside the range of acceptable weight range (400-6000 grams) or are missing information describing the number of prenatal care visits and month prenatal care visits began.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. Specifically, changes in prenatal care may be due wholly or in part due to reporting changes.

**3. Section Number:** Health Systems Capacity Indicator #04**Field Name:** HSC04**Row Name:****Column Name:****Year:** 2003**Field Note:**

These data come from the Washington State Center for Health Statistics Birth Certificate Files and are updated annually. The numerator represents the number of resident women (15-44 with a live birth) whose Adequacy of Prenatal Care Utilization (APNCU) index is greater than or equal to 80%. The denominator represents all resident women (15-44) with a live birth during the reporting year. 23.7% of the data are missing information describing the number of prenatal care visits and month prenatal care visits began.

In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003. Specifically, changes in prenatal care may be due wholly or in part to reporting changes.

**HEALTH SYSTEMS CAPACITY MEASURE # 07A**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	91.5	88.1	85.9	85.1	0.2
Numerator	540,687	563,000	584,657	590,428	
Denominator	590,667	639,177	680,979	694,163	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes****1. Section Number:** Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005.

**2. Section Number:** Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2004**Field Note:**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

2004 Indicator - 85.1%

Numerator - 590428

Denominator - 694163

The source of this data is the Client Services Database (CSDB), Research Data and Analysis, Washington State Department of Social and Health Services; and Office of Financial Management (OFM). The numerator represents clients aged 1 to 21 years who were Medicaid eligible (TXIX) during the fiscal year and received medical services. The denominator represents all clients aged 1 to 21 who were Medicaid eligible (TXIX) during the fiscal year. The denominator should not be considered as a measure of all Washington residents who were potentially Medicaid eligible; it includes only residents who applied for Medicaid benefits. Not all potentially eligible residents apply for benefits.

**3. Section Number:** Health Systems Capacity Indicator #07A**Field Name:** HSC07A**Row Name:****Column Name:****Year:** 2003**Field Note:**

Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.

2003 Indicator - 88.9%

Numerator - 605669

Denominator - 681060

Technical Note: The source of these data is the Client Services Database (CSDB), Research Data and Analysis, Washington State Department of Social and Health Services; and Office of Financial Management (OFM). The numerator represents clients aged 1 to 21 years who are receiving medical assistance (Note: Clients receiving medical assistance in SFY 2003 included 20,974 who were not designated as Medically Eligible under Title XIX at some point during the years. The data in the denominator are the total number of medically eligible clients aged 1 to 21 years old.

**HEALTH SYSTEMS CAPACITY MEASURE # 07B**

The percent of EPSDT eligible children aged 6 through 9 years who have received any dental services during the year.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	50.5	53.8	55.0	55	55
Numerator	69,496	75,891	74,122		
Denominator	137,708	141,160	134,749		
Is the Data Provisional or Final?				Provisional	Provisional

**Field Level Notes**

1. **Section Number:** Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data is unavailable for 2005.

2. **Section Number:** Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

Data is unavailable for 2004.

3. **Section Number:** Health Systems Capacity Indicator #07B

**Field Name:** HSC07B

**Row Name:**

**Column Name:**

**Year:** 2003

**Field Note:**

These data come from the Department of Social and Health Services Medical Assistance Administration. The numerator represents the number of Medicaid enrolled children 6-9 who received any dental service in 2003. The denominator represents the total number of children ages 6-9 enrolled in Medicaid in 2003, in both Healthy Options (the MAA managed care program) and fee-for-service.

**HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	<b>Annual Indicator Data</b>				
	<b>2001</b>	<b>2002</b>	<b>2003</b>	<b>2004</b>	<b>2005</b>
<b>Annual Indicator</b>	<u>11.0</u>	<u>8.9</u>	<u>10.3</u>	<u>7.7</u>	<u>6.1</u>
<b>Numerator</b>	<u>1,180</u>	<u>936</u>	<u>1,171</u>	<u>910</u>	<u>875</u>
<b>Denominator</b>	<u>10,720</u>	<u>10,570</u>	<u>11,418</u>	<u>11,893</u>	<u>14,300</u>
<b>Is the Data Provisional or Final?</b>				Final	Final

**Field Level Notes****1. Section Number:** Health Systems Capacity Indicator #08**Field Name:** HSC08**Row Name:****Column Name:****Year:** 2005**Field Note:**

The sources of these data are the Washington State CSHCN Child Health Intake Form (CHIF) database and the Federal Social Security Administration. The numerator is the unduplicated number of children under the age of 18 with a CHIF form completed indicating they have SSI coverage in 2005 (875). The denominator is from state-specific data from Children Receiving SSI, 2005. In Washington, this target is set low because Medicaid provides extensive benefits and the CSHCN program is the payor of last resort.

This data reflects children under the age of 18 instead of under the age of 16, because the SSI releases data with this cutoff. Therefore, any adjustment would only be a crude estimation. It is not possible to get an accurate percentage estimation for the gap between ages 16 and 18.

**2. Section Number:** Health Systems Capacity Indicator #08**Field Name:** HSC08**Row Name:****Column Name:****Year:** 2004**Field Note:**

The sources of these data are the Washington State CSHCN Child Health Intake Form (CHIF) database and the Federal Social Security Administration. The numerator is the number of children under the age of 16 with a CHIF form completed indicating they have SSI coverage in 2004 (910). The denominator is from state-specific data from the Healthy and Ready to Work National Center for SSI recipients December 2004. In Washington, this target is set low because Medicaid provides extensive benefits and the CSHCN program is the payor of last resort.

**3. Section Number:** Health Systems Capacity Indicator #08**Field Name:** HSC08**Row Name:****Column Name:****Year:** 2003**Field Note:**

The sources of these data are the Washington State CSHCN Child Health Intake Form (CHIF) database and the Federal Social Security Administration. The numerator is the number of kids with a Child Health Intake Form (CHIF) completed who have SSI in 2003 (1,171). The total number of entries in the CHIF database for 2002 was 10,399. The denominator is from state-specific SSI data from the Health and Ready to Work National Center. In Washington, this target is set low because Medicaid provides extensive benefits and the CSHCN program is the payer of last resort. Last year's figures have been updated.

FORM 18  
HEALTH SYSTEMS CAPACITY INDICATOR #05  
(MEDICAID AND NON-MEDICAID COMPARISON)  
STATE: WA

INDICATOR #05 <i>Comparison of health system capacity indicators for Medicaid, non-Medicaid, and all MCH populations in the State</i>	YEAR	DATA SOURCE	POPULATION		
			MEDICAID	NON-MEDICAID	ALL
a) <i>Percent of low birth weight (&lt; 2,500 grams)</i>	2004	Matching data files	<u>6.9</u>	<u>5.5</u>	<u>6.2</u>
b) <i>Infant deaths per 1,000 live births</i>	2004	Matching data files	<u>7</u>	<u>4.4</u>	<u>5.6</u>
c) <i>Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester</i>	2004	Matching data files	<u>69</u>	<u>88.3</u>	<u>79.3</u>
d) <i>Percent of pregnant women with adequate prenatal care (observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])</i>	2004	Matching data files	<u>61.2</u>	<u>73.3</u>	<u>67.7</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL)**  
**STATE: WA**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL MEDICAID</b> (Valid range: 100-300 percent)
a) <i>Infants (0 to 1)</i>	2004	<u>200</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2004	<u>200</u> <u>    </u> <u>    </u>
c) <i>Pregnant Women</i>	2004	<u>100</u>

**FORM 18**  
**HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL)**  
**STATE: WA**

<b>INDICATOR #06</b> <i>The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.</i>	<b>YEAR</b>	<b>PERCENT OF POVERTY LEVEL SCHIP</b>
a) <i>Infants (0 to 1)</i>	2004	<u>250</u>
b) <i>Medicaid Children</i> (Age range <u>1</u> to <u>18</u> ) (Age range <u>    </u> to <u>    </u> ) (Age range <u>    </u> to <u>    </u> )	2004	<u>250</u> <u>    </u> <u>    </u>
c) <i>Pregnant Women</i>	2004	<u>    </u>



## FORM NOTES FOR FORM 18

HSCI5: Comparison of health indicators for Medicaid, non-Medicaid, and all populations in the State

These data reflect the infant mortality rate for the 2002 Medicaid birth cohort. Thus, the number is based on the number of Medicaid and non-Medicaid infants born in 2003 who died in their infancy (so the death may have occurred in 2003 or in 2004). The overall number for this HSI differs from the CY 2004 period infant mortality rate for outcome measure #01. Outcome measure 01 is a period mortality rate and reflects the total number of infant deaths during CY2004 divided by the total number of live births in CY 2004.

The percent of missing data (unknown and excluded) for the Medicaid and Non-Medicaid comparisons are: LBW: 0.4 % Medicaid, 0.5% Non-Medicaid; First trimester PNC: 17.0% Medicaid, 18.7% Non-Medicaid, Adequate PNC: 22.8% Medicaid and 23.4% non-Medicaid.

HSCI6: The percent of poverty level for eligibility in the State's Medicaid and SCHIP programs for infants (0 to 1), children, and pregnant women

The source of these data is the Washington State Poverty Guidelines. The source for SCHIP eligibility comes from the Model Application Template For State Child Health Plan under Title XXI of the Social Security Act State Children's Health Insurance Program. SCHIP eligibility should read 201 to <=250.

## FIELD LEVEL NOTES

1. **Section Number:** Indicator 06 - SCHIP

**Field Name:** SCHIP\_Women

**Row Name:** Pregnant Women

**Column Name:**

**Year:** 2007

**Field Note:**

SCHIP does not serve adults.

2. **Section Number:** Indicator 05

**Field Name:** CareFirstTrimester

**Row Name:** Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester

**Column Name:**

**Year:** 2007

**Field Note:**

This data reflect the infants born to pregnant women receiving prenatal care for the 2004 Medicaid birth cohort. Thus, the number is based on the number of Medicaid and non-Medicaid infants born in 2003. This number differs from NPM 18 because the source is cohort data, instead of period data.

3. **Section Number:** Indicator 05

**Field Name:** AdequateCare

**Row Name:** Percent of pregnant women with adequate prenatal care

**Column Name:**

**Year:** 2007

**Field Note:**

This data reflect the percent of pregnant women receiving adequate prenatal care for the 2004 Medicaid birth cohort. Thus, the number is based on the number of Medicaid and non-Medicaid infants born in 2003. This number differs from HSCI 04 because the source is cohort data, instead of period data.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: WA**

**HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)**  
*(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Information)*

DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner? (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
<b>ANNUAL DATA LINKAGES</b>		
Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	3	No
Annual linkage of birth certificates and WIC eligibility files	2	No
Annual linkage of birth certificates and newborn screening files	3	No
<b>REGISTRIES AND SURVEYS</b>		
Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

\*Where:  
1 = No, the MCH agency does not have this ability.  
2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.  
3 = Yes, the MCH agency always has this ability.

**FORM 19**  
**HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM**  
**STATE: WA**

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)
Youth Risk Behavior Survey (YRBS)	1	No
Other: Healthy Youth Survey	3	Yes

\*Where:  
1 = No  
2 = Yes, the State participates but the sample size is not large enough for valid statewide estimates for this age group.  
3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

**Notes:**  
1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

**FORM NOTES FOR FORM 19****Annual Data Linkages:**

The Department of Health initiated an internal data sharing agreement to link the WIC eligibility files with the PRAMS survey data and the birth certificates for 1999-2001. MCH should have access to at least the WIC-PRAMS linked data. This linkage is in progress.

Washington does not link the birth certificate file to the newborn screening file. However, the newborn screening program does receive copies of the birth records from facilities and uses that information to monitor the children screened, and assures that children have access to treatment as necessary. Over 99% of children born in Washington are screened using this methodology.

Although MCH does not have direct access to the Medicaid and newborn screening data, we have a strong history of collaboration with our partners to obtain data needed for program planning. In addition, through our SSDI grant we have been working with partners in the Department of Social and Health Services to enhance our understanding and use of Medicaid data through the development of a data review process, data dictionary, and monthly data meeting.

Registries and Surveys: Washington has a passive birth defects surveillance system based on hospital discharge data. The BDSS is actively working on improving compliance with reporting requirements, enhancing data validation efforts, and boosting the data linkage to birth, fetal death and death certificates. Although Washington does not implement the YRBS, we do have a survey of adolescents implemented through the schools every two years. The Healthy Youth Survey is a collaborative effort of the Office of the Superintendent of Public Instruction, the Department of Health, the Department of Social and Health Service's Division of Alcohol and Substance Abuse, and the Office of Community Development. Students in grades 6, 8, 10, and 12 participate. The Healthy Youth Survey was administered in the Fall of 2004.

**FIELD LEVEL NOTES**

None

FORM 20  
HEALTH STATUS INDICATORS #01-#05  
MULTI-YEAR DATA  
STATE: WA

Form Level Notes for Form 11

None

**HEALTH STATUS INDICATOR MEASURE # 01A**

The percent of live births weighing less than 2,500 grams.

		<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005	
Annual Indicator	<u>5.8</u>	<u>5.8</u>	<u>6.0</u>	<u>6.2</u>	<u>6.2</u>	
Numerator	<u>4,588</u>	<u>4,529</u>	<u>4,857</u>	<u>5,063</u>		
Denominator	<u>79,142</u>	<u>77,907</u>	<u>80,482</u>	<u>81,715</u>		
Is the Data Provisional or Final?				Final	Provisional	

Field Level Notes

1. **Section Number:** Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #01A

**Field Name:** HSI01A

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This rate is determined by (the number of live births weighing less than 2500 grams divided by the total number of resident live births)\*1000. The source for these data are 2004 Natality Tables D1 and D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

**HEALTH STATUS INDICATOR MEASURE # 01B**

The percent of live singleton births weighing less than 2,500 grams.

		<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005	
Annual Indicator	4.5	4.3	4.6	4.6	4.6	
Numerator	3,454	3,316	3,594	3,646		
Denominator	77,242	76,661	78,029	79,268		
Is the Data Provisional or Final?				Final	Provisional	

**Field Level Notes**

1. **Section Number:** Health Status Indicator #01B

**Field Name:** HSI01B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #01B

**Field Name:** HSI01B

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This rate is determined by (the number of singleton live births weighing less than 2500 grams divided by the total number of resident singleton live births)\*1000. The source for these data are 2004 Natality Tables D1 and D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

**HEALTH STATUS INDICATOR MEASURE # 02A**

The percent of live births weighing less than 1,500 grams.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	1.0	1.0	1.0	1.1	1.1
Numerator	825	774	809	870	
Denominator	79,142	77,970	80,482	81,715	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #02A

**Field Name:** HSI02A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #02A

**Field Name:** HSI02A

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This rate is determined by (the number of live births weighing less than 1500 grams divided by the total number of resident live births)\*1000. The source for these data are 2004 Natality Tables D1 and D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).

**HEALTH STATUS INDICATOR MEASURE # 02B**

The percent of live singleton births weighing less than 1,500 grams.

		<u>Annual Indicator Data</u>			
	2001	2002	2003	2004	2005
Annual Indicator	0.8	0.8	0.8	0.8	0.8
Numerator	611	587	596	657	
Denominator	76,869	75,686	78,029	79,268	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #02B

**Field Name:** HSI02B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #02B

**Field Name:** HSI02B

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

This rate is determined by (the number of singleton live births weighing less than 1500 grams divided by the total number of resident singleton live births)\*1000. The source for these data are 2004 Natality Tables D1 and D5 reported in the Washington Center for Health Statistics Birth Certificate files (updated annually between September and October).



**HEALTH STATUS INDICATOR MEASURE # 03A**

The death rate per 100,000 due to unintentional injuries among children aged 14 years and younger.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	7.7	8.3	7.2	8.6	8.6
Numerator	97	104	90	108	
Denominator	1,259,241	1,260,062	1,256,446	1,257,310	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #03A

**Field Name:** HSI03A

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The rate is determined by (the number of unintentional injury death among children 14 years and younger divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

**HEALTH STATUS INDICATOR MEASURE # 03B**

The death rate per 100,000 for unintentional injuries among children aged 14 years and younger due to motor vehicle crashes.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	2.8	2.7	2.9	1.8	1.8
Numerator	35	34	36	23	
Denominator	1,259,241	1,260,067	1,256,446	1,257,310	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005.

**2. Section Number:** Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2004**Field Note:**

The rate is determined by (the number of unintentional injury death among children 14 years and younger due to motor vehicle crashes divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

**3. Section Number:** Health Status Indicator #03B**Field Name:** HSI03B**Row Name:****Column Name:****Year:** 2003**Field Note:**

**HEALTH STATUS INDICATOR MEASURE # 03C**

The death rate per 100,000 from unintentional injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	23.5	22.5	18.3	19.6	19.6
Numerator	197	192	159	173	
Denominator	839,143	854,561	867,887	882,550	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005.

**2. Section Number:** Health Status Indicator #03C**Field Name:** HSI03C**Row Name:****Column Name:****Year:** 2004**Field Note:**

The rate is determined by (the number of unintentional injury death among children ages 15 to 24 years divided by children ages 15 to 24 years). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

**HEALTH STATUS INDICATOR MEASURE # 04A**

The rate per 100,000 of all nonfatal injuries among children aged 14 years and younger.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	158.3	152.5	160.8	177.0	177
Numerator	1,994	1,922	2,020	2,226	
Denominator	1,259,241	1,260,062	1,256,446	1,257,310	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes****1. Section Number:** Health Status Indicator #04A**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2005**Field Note:**

Data were unavailable for the year 2005.

**2. Section Number:** Health Status Indicator #04A**Field Name:** HSI04A**Row Name:****Column Name:****Year:** 2004**Field Note:**

The rate is determined by (the number of nonfatal injuries among children 14 years and younger divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

**HEALTH STATUS INDICATOR MEASURE # 04B**

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among children aged 14 years and younger.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	21.3	20.4	19.0	19.2	19.2
Numerator	268	257	239	241	
Denominator	1,259,241	1,260,062	1,256,446	1,257,310	
Is the Data Provisional or Final?				Final	Provisional

**Field Level Notes**

1. **Section Number:** Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #04B

**Field Name:** HSI04B

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The rate is determined by (the number of nonfatal injuries due to motor vehicle crashes among children 14 years and younger divided by children ages 14 years and under). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

# HEALTH STATUS INDICATOR MEASURE # 04C

The rate per 100,000 of nonfatal injuries due to motor vehicle crashes among youth aged 15 through 24 years.

	Annual Indicator Data				
	2001	2002	2003	2004	2005
Annual Indicator	116.8	109.5	99.6	108.2	108.2
Numerator	980	936	864	955	
Denominator	839,143	854,561	867,887	882,550	
Is the Data Provisional or Final?				Final	Provisional

## Field Level Notes

1. **Section Number:** Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2005

**Field Note:**

Data were unavailable for the year 2005.

2. **Section Number:** Health Status Indicator #04C

**Field Name:** HSI04C

**Row Name:**

**Column Name:**

**Year:** 2004

**Field Note:**

The rate is determined by (the number of nonfatal injuries due to motor vehicle crashes among children ages 15 through 24 divided by children ages 15 through 24). The numerator is gathered from the Washington State Department of Health Injury and Violence Program. The denominator is gathered from the Office of Financial Management Population Forecast.

**HEALTH STATUS INDICATOR MEASURE # 05A**

The rate per 1,000 women aged 15 through 19 years with a reported case of chlamydia.

	<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005
Annual Indicator	19.8	20.4	22.7	22.6	22.7
Numerator	4,174	4,339	4,865	4,873	4,990
Denominator	210,946	212,805	214,010	216,028	219,516
Is the Data Provisional or Final?				Final	Final

**Field Level Notes****1. Section Number:** Health Status Indicator #05A**Field Name:** HSI05A**Row Name:****Column Name:****Year:** 2005**Field Note:**

The rate is determined by (the number of women ages 15 through 19 with a reported case of Chlamydia divided by women aged 15 through 19). The numerator is gathered from the Washington State Department of Infectious Disease and Reproductive Health. The denominator is gathered from the Office of Financial Management Population Forecast.

**2. Section Number:** Health Status Indicator #05A**Field Name:** HSI05A**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data were gathered from the Washington State STD Summary, Washington State Department of Health, 2004. Population estimates were gathered from the Office of Financial Management, 2004.

**HEALTH STATUS INDICATOR MEASURE # 05B**

The rate per 1,000 women aged 20 through 44 years with a reported case of chlamydia.

		<u>Annual Indicator Data</u>				
	2001	2002	2003	2004	2005	
Annual Indicator	<u>5.0</u>	<u>6.4</u>	<u>6.4</u>	<u>6.9</u>	<u>7.3</u>	
Numerator	<u>5,466</u>	<u>6,962</u>	<u>6,962</u>	<u>7,521</u>	<u>7,960</u>	
Denominator	<u>1,088,230</u>	<u>1,087,383</u>	<u>1,084,663</u>	<u>1,085,707</u>	<u>1,089,135</u>	
Is the Data Provisional or Final?				Final	Final	

**Field Level Notes****1. Section Number:** Health Status Indicator #05B**Field Name:** HSI05B**Row Name:****Column Name:****Year:** 2005**Field Note:**

The rate is determined by (the number of women ages 20 through 44 years with a reported case of Chlamydia divided by women aged 20 through 44 years). The numerator is gathered from the Washington State Department of Infectious Disease and Reproductive Health. The denominator is gathered from the Office of Financial Management Population Forecast.

**2. Section Number:** Health Status Indicator #05B**Field Name:** HSI05B**Row Name:****Column Name:****Year:** 2004**Field Note:**

Data were gathered from the Washington State STD Summary, Washington State Department of Health, 2004. Population estimates were gathered from the Office of Financial Management, 2004.



**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #06A - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics)*

For both parts A and B: Reporting Year: 2003    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL POPULATION BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	84,059	67,016	4,669	1,709	4,121	461	6,083	0
Children 1 through 4	339,358	271,847	18,686	7,017	17,784	1,929	22,095	0
Children 5 through 9	430,900	350,899	22,747	9,233	21,824	2,505	23,692	0
Children 10 through 14	465,421	383,626	22,717	10,473	24,135	2,586	21,884	0
Children 15 through 19	455,096	375,200	20,592	9,678	27,816	2,821	18,989	0
Children 20 through 24	440,784	363,031	20,445	8,629	30,710	3,015	14,954	0
Children 0 through 24	2,215,618	1,811,619	109,856	46,739	126,390	13,317	107,697	0

**HSI #06B - Demographics (Total Population)** *Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)*

<b>CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	64,991	13,812	0
Children 1 through 4	270,003	50,260	0
Children 5 through 9	353,996	56,548	0
Children 10 through 14	399,148	47,712	0
Children 15 through 19	392,309	47,047	0
Children 20 through 24	374,455	54,254	0
Children 0 through 24	1,854,902	269,633	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #07A - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and race. (Demographics)*

For both parts A and B: Reporting Year: 2005    Is this data from a State Projection? No    Is this data final or provisional? Final

<b>CATEGORY TOTAL LIVE BIRTHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Women < 15	94	70	4	8	2	1	7	2
Women 15 through 17	2,006	1,576	102	103	49	15	118	43
Women 18 through 19	4,727	3,818	237	184	101	45	248	94
Women 20 through 34	62,461	50,353	2,253	1,160	4,786	556	1,860	1,493
Women 35 or older	12,384	9,897	389	125	1,351	56	225	341
Women of all ages	81,672	65,714	2,985	1,580	6,289	673	2,458	1,973

**HSI #07B - Demographics (Total live births)** *Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)*

<b>CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Women < 15	37	56	1
Women 15 through 17	1,194	771	41
Women 18 through 19	3,352	1,265	110
Women 20 through 34	49,930	10,824	1,707
Women 35 or older	10,569	1,329	486
Women of all ages	65,082	14,245	2,345

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #08A - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics)

For both parts A and B: Reporting Year: 2004    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>CATEGORY TOTAL DEATHS BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>
Infants 0 to 1	451	347	29	16	17	4	33	5
Children 1 through 4	68	56	3	1	4	0	4	0
Children 5 through 9	49	39	1	3	2	3	1	0
Children 10 through 14	59	47	5	3	2	2	0	0
Children 15 through 19	254	204	15	15	15	2	3	0
Children 20 through 24	347	286	23	17	18	1	2	0
Children 0 through 24	1,228	979	76	55	58	12	43	5

**HSI #08B - Demographics (Total deaths)** Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

<b>CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>
Infants 0 to 1	357	94	0
Children 1 through 4	52	16	0
Children 5 through 9	44	5	0
Children 10 through 14	49	10	0
Children 15 through 19	221	33	0
Children 20 through 24	307	40	0
Children 0 through 24	1,030	198	0

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #09A - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)*

Is this data final or provisional? Provisional

<b>CATEGORY Miscellaneous Data BY RACE</b>	<b>Total All Races</b>	<b>White</b>	<b>Black or African American</b>	<b>American Indian or Native Alaskan</b>	<b>Asian</b>	<b>Native Hawaiian or Other Pacific Islander</b>	<b>More than one race reported</b>	<b>Other and Unknown</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,695,825	1,389,289.0	71,566.0	36,244.0	95,680.0	10,303.0	92,743.0	0	2004
Percent in household headed by single parent	27.0	25.0	61.4	50.1	16.9	0	0	0	2004
Percent in TANF (Grant) families	24.4	49.9	10.1	2.9	3.3	0	23.9	10.0	2004
Number enrolled in Medicaid	709,939	377,455.0	38,460.0	14,996.0	30,032.0	0	131,465.0	117,531.0	2004
Number enrolled in SCHIP	20,732	12,456.0	513.0	574.0	1,364.0	0	2,541.0	3,284.0	2004
Number living in foster home care	10,994	5,614.0	852.0	818.0	86.0	0	3,432.0	192.0	2004
Number enrolled in food stamp program	323,484	173,184.0	25,518.0	8,309.0	10,694.0	0	71,665.0	34,114.0	2004
Number enrolled in WIC	218,099	174,556.0	18,947.0	10,245.0	10,928.0	3,423.0	0	0	2004
Rate (per 100,000) of juvenile crime arrests	2,412.0	2,368.0	4,514.0	3,611.0	943.0	0	0	0	2004
Percentage of high school drop-outs (grade 9 through 12)	5.8	5.0	9.7	12.0	3.7	0	0	5.0	2005

**HSI #09B - Demographics (Miscellaneous Data)** *Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)*

<b>CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY</b>	<b>Total NOT Hispanic or Latino</b>	<b>Total Hispanic or Latino</b>	<b>Ethnicity Not Reported</b>	<b>Specific Reporting Year</b>
All children 0 through 19	1,480,447.0	215,379.0	0	2003
Percent in household headed by single parent	26.4	33.6	0	2004
Percent in TANF (Grant) families	73.4	23.0	3.5	2004
Number enrolled in Medicaid	502,428.0	142,920.0	64,591.0	2004
Number enrolled in SCHIP	15,432.0	3,025.0	2,275.0	2004
Number living in foster home care	9,185.0	1,757.0	52.0	2004
Number enrolled in food stamp program	238,004.0	73,145.0	12,335.0	2004
Number enrolled in WIC	144,077.0	74,022.0	0	2004
Rate (per 100,000) of juvenile crime arrests	0	3,153.0	0	2004
Percentage of high school drop-outs (grade 9 through 12)	0	10.2	0	2004

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #10 - Demographics (Geographic Living Area)** *Geographic living area for all resident children aged 0 through 19 years old. (Demographics)*

Reporting Year: 2005    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>GEOGRAPHIC LIVING AREAS</b>	<b>TOTAL</b>
Living in metropolitan areas	<u>1,167,447</u>
Living in urban areas	<u>1,401,658</u>
Living in rural areas	<u>171,691</u>
Living in frontier areas	<u>124,554</u>
<b>Total - all children 0 through 19</b>	<u>1,697,903</u>

**Note:**

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #11 - Demographics (Poverty Levels)** *Percent of the State population at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2005    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>POVERTY LEVELS</b>	<b>TOTAL</b>
Total Population	<u>6,098,300.0</u>
Percent Below: 50% of poverty	<u>7.7</u>
100% of poverty	<u>15.1</u>
200% of poverty	<u>30.9</u>

**FORM 21**  
**HEALTH STATUS INDICATORS**  
**DEMOGRAPHIC DATA**  
**STATE: WA**

**HSI #12 - Demographics (Poverty Levels)** *Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics)*

Reporting Year: 2005    Is this data from a State Projection? No    Is this data final or provisional? Provisional

<b>POVERTY LEVELS</b>	<b>TOTAL</b>
Children 0 through 19 years old	<u>1,695,728.0</u>
Percent Below: 50% of poverty	<u>9.6</u>
100% of poverty	<u>19.0</u>
200% of poverty	<u>37.8</u>

## FORM NOTES FOR FORM 21

Data were unavailable for the year 2005. Release is expected in late Summer 2006. In 2003 a new birth certificate form was implemented. It collects some information differently, and caution should be used in interpreting year to year changes from 2002 to 2003.

HSI 06A & 06B: The source of this demographic data are the 2003 population data from the Software for Public Health Assessment (VistaPHw); Analysis Software: Public Health - Seattle & King County, Epidemiology, Planning & Evaluation. It does not provide the specified breakdowns in these age groups of Other and Unknown or Ethnicity Not Reported.

HSI 07A & 07B: The source of this data is the Washington State Center for Health Statistics. Totals for "Women of all ages" do not include women with a live birth whose age was unknown. The following are data for women with a live birth whose age was unknown: 43 (Total), 28 (White), 6 (African American), 0 (AIAN), 3 (Asian), 0 (Other PI), 0 (more than one race), 6 (Other/Unknown race), 36 (Non-Hispanic), 5(Hispanic), and 2 (ethnicity not reported).

HSI 08A & 08B: The 2004 Death Certificate now includes the field of "more than one race reported". The source of this data is the Washington State Center for Health Statistics, Death Files.

HSI 10: Census 2000 data was used for this data.

HSI 11 & 12: Data were gathered from the 2004 Washington State Population Survey, Office of Financial Management Forecasting Division. No new data was available this year.

## FIELD LEVEL NOTES

1. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_Children  
**Row Name:** All children 0 through 19  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of Other and Unknown.
2. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the categories of NHOPI, More than one race reported, and Other and Unknown.
3. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_TANFPercent  
**Row Name:** Percent in TANF (Grant) families  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of NHOPI.
4. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_SCHIPNo  
**Row Name:** Number enrolled in SCHIP  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of NHOPI.
5. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_FoodStampNo  
**Row Name:** Number enrolled in food stamp program  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of NHOPI.
6. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_WICNo  
**Row Name:** Number enrolled in WIC  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the categories of NHOPI, More than one race reported, and Other and Unknown.
7. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the categories of NHOPI, More than one race reported, and Other and Unknown.
8. **Section Number:** Indicator 09A  
**Field Name:** HSIRace\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the categories of NHOPI and More than one race reported.
9. **Section Number:** Indicator 09B  
**Field Name:** HSIEthnicity\_Children  
**Row Name:** All children 0 through 19  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of Ethnicity Not Reported.
10. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_SingleParentPercent  
**Row Name:** Percent in household headed by single parent  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of Ethnicity Not Reported.

11. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_WICNo  
**Row Name:** Number enrolled in WIC  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of Ethnicity Not Reported.

12. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_JuvenileCrimeRate  
**Row Name:** Rate (per 100,000) of juvenile crime arrests  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of Not Hispanic or Ethnicity Not Reported.

13. **Section Number:** Indicator 09B

**Field Name:** HSIEthnicity\_DropOutPercent  
**Row Name:** Percentage of high school drop-outs (grade 9 through 12)  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of Not Hispanic or Ethnicity Not Reported.

14. **Section Number:** Indicator 09A

**Field Name:** HSIRace\_FosterCare  
**Row Name:** Number living in foster home care  
**Column Name:**  
**Year:** 2007  
**Field Note:**  
Data is unavailable for the category of NHOP1.